

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Republican Party of Florida

ADDRESS (number and street)

420 E. Jefferson Street

☐Check if different  
than previously  
reported. (ACC)

Tallahassee

FL

32301

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00099259

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☒Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

10

01

2007

through

10

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Joel Pate

Signature of Treasurer

Electronically Filed by Joel Pate

Date

01

19

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Republican Party of Florida

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	0	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		558032.20
(b) Cash on Hand at Beginning of Reporting Period .....	1757124.80	
(c) Total Receipts (from Line 19) .....	671959.34	7622817.60
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	2429084.14	8180849.80
7. Total Disbursements (from Line 31) .....	1063354.64	6815120.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1365729.50	1365729.50
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	922622.33	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name  
Republican Party of Florida

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	54494.84	1148959.84
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	82011.79	1042288.53
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	136506.63	2191248.37
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5800.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....	136506.63	2197048.37
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	9003.00	9003.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	4955.82	624167.70
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	521493.89	4792598.53
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	521493.89	4792598.53
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	671959.34	7622817.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	150465.45	2830219.07

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	245762.86	1903857.99
(ii) Non-Federal Share.....	632798.78	4347874.89
(b) Other Federal Operating Expenditures.....	27782.55	198100.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	906344.19	6449833.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	2600.00	12600.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	2600.00	12600.00
29. Other Disbursements.....	30005.00	220121.65
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	124405.45	132565.06
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	124405.45	132565.06
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1063354.64	6815120.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	430555.86	2467245.41

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	136506.63	2197048.37
34. Total Contribution Refunds (from Line 28(d)) .....	2600.00	12600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	133906.63	2184448.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	273545.41	2101958.70
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	9003.00	9003.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	264542.41	2092955.70

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Paul Ackerman

Mailing Address 1634 Tiverton Street

City

Winter Springs

State

FL

Zip Code

32708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Seminole County School Bo-  
ard

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410737

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

James Adkins

Mailing Address 24402 Mondon Hill Road

City

Brooksville

State

FL

Zip Code

34601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411905

Amount of Each Receipt this Period

300.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Janet Adkins

Mailing Address 863 Laguna Drive

City

Fernandina Beach

State

FL

Zip Code

32034

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nassau County

Occupation  
School board

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410738

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Donna Allocco

Mailing Address 6388 Duck Call Court

City

Tallahassee

State

FL

Zip Code

32309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tallahassee Community Col-  
lege

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410741

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

William Allyn

Mailing Address 525 Gulf Shore Blvd. N.

City

Naples

State

FL

Zip Code

34102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411805

Amount of Each Receipt this Period

500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Doug Apperson

Mailing Address 246 Strathmore Circle

City

Kissimmee

State

FL

Zip Code

34744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410746

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Richard Armstrong

Mailing Address 860 Pinegrove Court

City

Wheaton

State

IL

Zip Code

60187-3276

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Transaction ID: 71015.C1408895

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Wanda Arnold

Mailing Address 36422 Pine Street

City

Hilliard

State

FL

Zip Code

32046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410747

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Marvin Artman

Mailing Address 6845 SW CR 225

City

Starke

State

FL

Zip Code

32091

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 0 7

Transaction ID: 71015.C1409416

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Theresa Ashkar

Mailing Address 6500 SW 79th Court

City

Miami

State

FL

Zip Code

33143-2520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Florida Women for Mitt

Occupation

County Co-Chair

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411941

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Leslie Ashmead

Mailing Address 1286 Lake Shore Drive

City

Carol Stream

State

IL

Zip Code

60188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sierra Western

Occupation

Mortgage Processor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410751

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Herman Baine

Mailing Address 7865 Springvale Drive

City

Lake Worth

State

FL

Zip Code

33467-7347

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Broward Co Community College

Occupation

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71029.C1411085

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Herman Baine

Mailing Address 7865 Springvale Drive

City

Lake Worth

State

FL

Zip Code

33467-7347

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Broward Co Community College

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410752

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Patricia Baker

Mailing Address 6647 Bobby Jones Court

City

Palmetto

State

FL

Zip Code

34221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410753

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

J. Burr Bartram

Mailing Address 1520 SW 15th Avenue

City

Fort Lauderdale

State

FL

Zip Code

33312-3308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bartram & Brakenhoff Yacht Bro

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.05

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 0 / 2 0 0 7

Transaction ID: 71015.C1409298

Amount of Each Receipt this Period

109.84

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

409.84

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 224

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Emmette Bass

Mailing Address 15904 Trevoze Lane

City

Odessa

State

FL

Zip Code

33556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

Transaction ID: 71029.C1410754

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Joe Ann Batcheller

Mailing Address 4595 Sabal Palm Road

City

Miami

State

FL

Zip Code

33137-3363

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	0	7

Transaction ID: 71015.C1408878

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Warren Bateman

Mailing Address PO Box 557395

City

Miami

State

FL

Zip Code

33255-7395

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	0	7

Transaction ID: 71015.C1408901

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Jane Bauer

Mailing Address 918 Freeburg Avenue

City

Belleville

State

IL

Zip Code

62220-2623

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410755

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Geraldine Beck

Mailing Address 2286 Norwegian Drive, #32

City

Clearwater

State

FL

Zip Code

33763

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C1409287

Amount of Each Receipt this Period

15.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Karl Beermunder

Mailing Address 7016 Schering Street

City

Weeki Wachee

State

FL

Zip Code

34613-6220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 7

Transaction ID: 71018.C1409892

Amount of Each Receipt this Period

75.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

240.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Peter Bergsten

Mailing Address PO Box 640

City

Bokeelia

State

FL

Zip Code

33922-0640

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71108.C1411355

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Ted Bernstein

Mailing Address 15807 Menton Bay Court

City

Delray Beach

State

FL

Zip Code

33446

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Insurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411662

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

David Biddle

Mailing Address 5579 SE 91st Trail

City

Trenton

State

FL

Zip Code

32693

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410762

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Brandon Blackburn

Mailing Address 1790 Bryan Avenue

City

Winter Park

State

FL

Zip Code

32789

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410764

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Maxine Blakely

Mailing Address 954 Maple Lane

City

Jacksonville

State

FL

Zip Code

32207-4009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Home Maker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410765

Amount of Each Receipt this Period

300.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Philip Blumel

Mailing Address 240 Walton Heath Drive

City

Atlantis

State

FL

Zip Code

33462

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Raymond James & Assoc.

Occupation  
Financial Planner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410770

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Kathryn Bolon

Mailing Address 3923 Spyglass Hill Road

City

Sarasota

State

FL

Zip Code

34238-2826

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410772

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

George Bookhout

Mailing Address 1620 SW 7th Terrace

City

Boca Raton

State

FL

Zip Code

33486-7017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71030.C1411181

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

William W. Boyd

Mailing Address PO Box 1147

City

Tallahassee

State

FL

Zip Code

32302-1147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation

Mechanical Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: 71017.C1409752

Amount of Each Receipt this Period

50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

John Brogan

Mailing Address 400 N. Flagler Drive, Apt. 1906

City

West Palm Beach

State

FL

Zip Code

33401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71015.C1409057

Amount of Each Receipt this Period

600.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Richard Brown

Mailing Address 211 Nandina Terrace

City

Winter Springs

State

FL

Zip Code

32708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
restauranteur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410775

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Robert Brown

Mailing Address 12 Wild Grape Drive

City

Fernandina Beach

State

FL

Zip Code

32034-6531

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410776

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

James Browne

Mailing Address PO Box 49071

City

Saint Petersburg

State

FL

Zip Code

33743

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410777

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John M. Brunner

Mailing Address 763 98th Avenue

City

Naples

State

FL

Zip Code

34108-2223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Collier County Schools

Occupation

Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410778

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

William Bucknam

Mailing Address 8039 Nevis Place

City

Wellington

State

FL

Zip Code

33414

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410779

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

William Burgess

Mailing Address 8335 Monarch Circle

City

Seminole

State

FL

Zip Code

34642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Of Florida

Occupation

Asst. State Attorney

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410780

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John Burr

Mailing Address 604 Fairpoint Drive

City

Gulf Breeze

State

FL

Zip Code

32561-4112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: 71016.C1409652

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Susan Burrows

Mailing Address 11474 Swift Water Circle

City

Orlando

State

FL

Zip Code

32817-1440

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Orange County School Board

Occupation

School Administrator

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410781

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Harvey Bush

Mailing Address 13370 Old Dixie Highway

City

Sebastian

State

FL

Zip Code

32958-3480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 0 / 2 0 0 7

Transaction ID: 71015.C1409299

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John Cabanas

Mailing Address 6767 Collins Avenue, Apt. 702

City

Miami Beach

State

FL

Zip Code

33141

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
C & T Charters

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1411007

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Orlando Cabrera

Mailing Address 1865 Brickell Avenue, Apt. A2003

City

Miami

State

FL

Zip Code

33129-1652

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Transaction ID: 71015.C1408668

Amount of Each Receipt this Period

80.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1130.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

George Calvert

Mailing Address 3405 Amberjack Drive

City

Spring Hill

State

FL

Zip Code

34607-3602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71108.C1411659

Amount of Each Receipt this Period

205.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

George Carabin

Mailing Address 3800 7th Place

City

Vero Beach

State

FL

Zip Code

32968-1318

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Vero Beach Theatre Guild

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1410461

Amount of Each Receipt this Period

60.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Rocelia Card

Mailing Address 6323 Thomas Drive, Apt. 1105

City

Panama City

State

FL

Zip Code

32408-5668

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 71029.C1410444

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

365.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Katharine Carek

Mailing Address 1401 Gulf Blvd., Apt. 203

City

Clearwater

State

FL

Zip Code

33767

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411913

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Stephany S. Carr

Mailing Address 2641 Airport Road South, Ste. A108

City

Naples

State

FL

Zip Code

34112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410783

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Patrick Cha-Fong

Mailing Address 2179 NW 73rd Terrace

City

Pembroke Pines

State

FL

Zip Code

33024-1049

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kingston-Miami Trading

Occupation  
Businessman/Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C1409159

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Charles Clark

Mailing Address 35320 W. Griffin Drive

City

Fruitland Park

State

FL

Zip Code

34731-6088

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410788

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Valerie Clines

Mailing Address 280 John Knox Road, #113

City

Tallahassee

State

FL

Zip Code

32303-6653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410790

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Rhoda Cobb

Mailing Address 336 E Coconut Palm Road

City

Boca Raton

State

FL

Zip Code

33432-7924

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 7

Transaction ID: 71108.C1412035

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 224

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Joseph Cobo

Mailing Address PO Box 7455

City

Fort Lauderdale

State

FL

Zip Code

33338

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Florinda Medical ManagementOccupation  
Healthcare

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

Transaction ID: 71029.C1410791

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Kenneth Collins

Mailing Address 2348 SE 10th Court

City

Pompano Beach

State

FL

Zip Code

33062-7017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Seabulk TowingOccupation  
Tugboat Pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

Transaction ID: 71029.C1410792

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Theodore Connolly

Mailing Address 17505 SW 84th Avenue

City

Palmetto Bay

State

FL

Zip Code

33157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	0	7

Transaction ID: 71029.C1411034

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

400.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Mark Cook

Mailing Address 1097 Coronado Drive

City

Rockledge

State

FL

Zip Code

32955-3311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Westfield Realty Group

Occupation

Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410793

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John Costa

Mailing Address 2605 E. Atlantic Blvd., Ste. 213

City

Pompano Beach

State

FL

Zip Code

33062-4948

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Costa Properties

Occupation

Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411769

Amount of Each Receipt this Period

400.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Michelle Covey

Mailing Address 7248 Captiva Circle

City

New Port Richey

State

FL

Zip Code

34655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410794

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Sara Cramer

Mailing Address 5396 Gulf Blvd., #1102

City

St. Pete Beach

State

FL

Zip Code

33706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410795

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Hugh W. Crawford

Mailing Address 94509 Harbor Court

City

Fort Myers

State

FL

Zip Code

33908-1678

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1411033

Amount of Each Receipt this Period

230.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Jose Cubas

Mailing Address 199 Ocean Lane Drive, #501

City

Key Biscayne

State

FL

Zip Code

33149

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Siboney

Occupation  
Advertising

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411731

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

480.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Gary Cunningham

Mailing Address PO Box 560990

City

Rockledge

State

FL

Zip Code

32955-2417

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71015.C1409056

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John Darin

Mailing Address 4096 Winterwood Court

City

Orlando

State

FL

Zip Code

32812-7955

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wicker Smith et al

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 7

Transaction ID: 71017.C1409797

Amount of Each Receipt this Period

315.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Larry Davidson

Mailing Address 5180 Bodega Place

City

Delray Beach

State

FL

Zip Code

33484

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Transaction ID: 71015.C1408811

Amount of Each Receipt this Period

50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

465.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Dorothy Davis

Mailing Address 8300 Wilde Lake Road

City

Pensacola

State

FL

Zip Code

32526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410798

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Paul Devlin

Mailing Address 315 Tulane Circle

City

Avon Park

State

FL

Zip Code

33825-3852

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Avanti Company

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410801

Amount of Each Receipt this Period

300.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Paul Dickey

Mailing Address 216 Pendleton Avenue

City

Palm Beach

State

FL

Zip Code

33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 7

Transaction ID: 71015.C1408911

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Anthony Dinos

Mailing Address 1620 SE 10th Street

City

Fort Lauderdale

State

FL

Zip Code

33316-1422

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71015.C1409076

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Jane Dommerich

Mailing Address 28 Middle Road

City

Palm Beach

State

FL

Zip Code

33480-4712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C1409239

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Helen Donnell

Mailing Address 11605 NE 10th Avenue

City

Miami

State

FL

Zip Code

33161

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C1409156

Amount of Each Receipt this Period

75.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

475.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Chris Doty

Mailing Address 10622 Restoration Terrace

City

Bradenton

State

FL

Zip Code

34212-6205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410804

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Leslie Dougher

Mailing Address 3207 Bellows Court

City

Middleburg

State

FL

Zip Code

32068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GMAC Real Estate

Occupation

Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410805

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Michael Eader

Mailing Address 2852 Turnbull Estates Drive

City

New Smyrna Beach

State

FL

Zip Code

32168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410808

Amount of Each Receipt this Period

300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Laurence Earle

Mailing Address 429 Buttonwood Lane

City

Largo

State

FL

Zip Code

33770-4060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation

Retired Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1410550

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Teresa Eaton

Mailing Address 1506 Inverness Road

City

Lynn Haven

State

FL

Zip Code

32444-5447

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410809

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John Edgeworth

Mailing Address 9397 Midnight Pass Road

City

Sarasota

State

FL

Zip Code

34242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1410553

Amount of Each Receipt this Period

200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Roger Enzor

Mailing Address 4111 McClellan Road

City

Pensacola

State

FL

Zip Code

32503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prudential Tropical Realty

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410810

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Donald Everett

Mailing Address 2715 S. Byron Butler Pkwy.

City

Perry

State

FL

Zip Code

32348-6309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ware Oil & Supply Co.

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1410530

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Anthony Farentino

Mailing Address 3320 Wilderness Trail

City

Kissimmee

State

FL

Zip Code

34746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ET Auto Sales, Inc.

Occupation  
Auto Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410817

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Anthony Farentino

Mailing Address 3320 Wilderness Trail

City

Kissimmee

State

FL

Zip Code

34746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ET Auto Sales, Inc.

Occupation

Auto Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410822

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Keith Farner

Mailing Address 12185 Virginia Drive

City

Leesburg

State

FL

Zip Code

34788-4512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Leesburg Water Authority

Occupation

Board Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410818

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Joseph Farrell

Mailing Address PO Box 165485

City

Fort Lauderdale

State

FL

Zip Code

33316-5485

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Ship Salvage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 7

Transaction ID: 71017.C1409805

Amount of Each Receipt this Period

200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Catherine Fendig

Mailing Address 559 Magnolia Avenue

City

Saint Simons Islan

State

GA

Zip Code

31522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fendig Realty

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410815

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Charles Fetscher

Mailing Address 2586 Bedford Mews Drive

City

Wellington

State

FL

Zip Code

33414

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CCMS

Occupation  
Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410827

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Joseph Foster

Mailing Address 7509 Cordoba Circle

City

Naples

State

FL

Zip Code

34109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Porter Wright Morris & Ar-  
thur

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410828

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Shawn E. Foster

Mailing Address 8711 Forest Lake Drive

City

Port Richey

State

FL

Zip Code

34668

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410829

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Helen Franta

Mailing Address 360 Duet Avenue

City

Merritt Island

State

FL

Zip Code

32952-3708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Home Maker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410831

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Earl Fratus

Mailing Address 36750 US 19 N., #2030

City

Palm Harbor

State

FL

Zip Code

34684

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411906

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Ralph Freudenthal

Mailing Address 8737 Estate Drive

City

West Palm Beach

State

FL

Zip Code

33411-6594

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation

Toxicologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411756

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Robert Gardiner

Mailing Address PO Box 265

City

Far Hills

State

NJ

Zip Code

07931-0265

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Transaction ID: 71015.C1408907

Amount of Each Receipt this Period

500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John German

Mailing Address PO Box 925

City

Naples

State

FL

Zip Code

34113-0925

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
North Naples Fire Rescue  
Distr

Occupation

Assistant Fire Chief

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410846

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Republican Party of Florida

A.

Full Name (Last, First, Middle Initial)

James Gessells

Mailing Address 124 Mickler Blvd.

City

St. Augustine

State

FL

Zip Code

32080-7962

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 7

Transaction ID: 71015.C1408961

Amount of Each Receipt this Period

125.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Larry Gigerich

Mailing Address 8342 Carloway Road

City

Indianapolis

State

IN

Zip Code

46236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GinovusOccupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: 71029.C1410192

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Sherry Goad

Mailing Address 2309 Carriage Run Road

City

Kissimmee

State

FL

Zip Code

34741-3706

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mildred Trevett, MD, PAOccupation  
Medical Billing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410847

Amount of Each Receipt this Period

150.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

375.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

David Gobeo

Mailing Address 904 E. McBerry Street

City

Tampa

State

FL

Zip Code

33603

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Constangy, Brooks & Smith,  
LLC

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410848

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Nicole Goc

Mailing Address 839 Eldorado Avenue

City

Clearwater

State

FL

Zip Code

33767

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410849

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Jay Goldfarb

Mailing Address 4360 Silver Glen Drive

City

Wellington

State

FL

Zip Code

33467

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Budget Printing Center,  
LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410850

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Mark Gotz

Mailing Address 154 NW Magnolia Lakes Blvd.

City

Port Saint Lucie

State

FL

Zip Code

34986

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410852

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Albert Graf

Mailing Address 4400 Mobile Highway

City

Pensacola

State

FL

Zip Code

32506-4210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Standard Parts

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 71029.C1410241

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Thomas Graves

Mailing Address 6513 Sugar Creek Place

City

Mobile

State

AL

Zip Code

36695

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clare, Graves & Reischmann,  
P.A.

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C1409211

Amount of Each Receipt this Period

500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Judith Gregory

Mailing Address 16575 Hutchison Road

City

Odessa

State

FL

Zip Code

33556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cendant Corporation

Occupation

Regional Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410854

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Linda Grier

Mailing Address 516 Jacaranda Lane

City

Kissimmee

State

FL

Zip Code

34744

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410856

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Denise Grimsley

Mailing Address 19 Sunset Lane

City

Lake Placid

State

FL

Zip Code

33852

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Grimsley Oil Company, Inc.

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410859

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Frederick W. Guardabassi

Mailing Address 915 Middle River Drive

City

Fort Lauderdale

State

FL

Zip Code

33304-3544

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: 71017.C1409754

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John Hamilton

Mailing Address 300 Beach Drive NE, Unit 2302

City

Saint Petersburg

State

FL

Zip Code

33701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1730.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1410562

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Alex Hanna

Mailing Address 8700 W. Flagler Street, #380

City

Miami

State

FL

Zip Code

33174

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410862

Amount of Each Receipt this Period

300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Steven Harris

Mailing Address 1068 Laguna Springs Drive

City

Weston

State

FL

Zip Code

33326

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411903

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Marion Hart

Mailing Address PO Box 6602

City

Tallahassee

State

FL

Zip Code

32314-6602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Florida DOT

Occupation

Administration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411333

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Joan Hartt

Mailing Address 1200 18th Street NW, Ste. 1010

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410865

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Tina Haut

Mailing Address 589 Egrets Run, #102

City

Naples

State

FL

Zip Code

34108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410866

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Frank Hawley

Mailing Address PO Box 2129

City

Boca Grande

State

FL

Zip Code

33921-2129

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Saugatuck Capital Co.

Occupation  
Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Transaction ID: 71015.C1408842

Amount of Each Receipt this Period

200.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Glenna Hileman

Mailing Address 9711 Via Segovia

City

New Port Richey

State

FL

Zip Code

34655-5207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Sales management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410875

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Janet Hill

Mailing Address 2 Wharf Avenue

City

Placida

State

FL

Zip Code

33946-0005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
real estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410876

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Terry Hinshaw

Mailing Address 1500 Ocean Drive, Ph. 3

City

Miami Beach

State

FL

Zip Code

33139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1411090

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Erich Hintze

Mailing Address Heron Cove 104  
150 Broadway

City

Englewood

State

FL

Zip Code

34223-3392

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C1409292

Amount of Each Receipt this Period

25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

575.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Erich Hintze

Mailing Address Heron Cove 104  
150 Broadway

City State Zip Code  
Englewood FL 34223-3392

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 7

Transaction ID: 71108.C1411951

Amount of Each Receipt this Period

-25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Erich Hintze

Mailing Address Heron Cove 104  
150 Broadway

City State Zip Code  
Englewood FL 34223-3392

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411908

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Mary Ann Hogan

Mailing Address 22331 Powell Road

City State Zip Code  
Brooksville FL 34602-3601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
n/a

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410879

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 45 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Thomas Hogan

Mailing Address 22331 Powell Road

City

Brooksville

State

FL

Zip Code

34602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hogan Law Firm

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410881

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Adam Honig

Mailing Address 1441 SW 30th Avenue

City

Pompano Beach

State

FL

Zip Code

33069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C1409236

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Adam Honig

Mailing Address 1441 SW 30th Avenue

City

Pompano Beach

State

FL

Zip Code

33069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71030.C1411228

Amount of Each Receipt this Period

50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 46 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

William Hoskins

Mailing Address Unit 20 A/B 85 East India Row

City

Boston

State

MA

Zip Code

02110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hoskins Associates

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 71029.C1410204

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Jacqueline Husebo

Mailing Address 33845 Overton Drive

City

Leesburg

State

FL

Zip Code

34788

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410883

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

R. Scott Inboden

Mailing Address 2635 Robert Oliver Avenue

City

Fernandina Beach

State

FL

Zip Code

32034-6010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411364

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Raymond R. Irwin

Mailing Address 19050 SE County Line Road

City

Tequesta

State

FL

Zip Code

33469-1679

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Transaction ID: 71015.C1408698

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Tony D. Jackson

Mailing Address 808 Chadworth Avenue

City

Seffner

State

FL

Zip Code

33584

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Committeeman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410884

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Karen Jaroch

Mailing Address 16501 E. Course Drive

City

Tampa

State

FL

Zip Code

33624

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71016.C1409672

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 48 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Karen Jaroch

Mailing Address 16501 E. Course Drive

City

Tampa

State

FL

Zip Code

33624

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411907

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Danny Johnson

Mailing Address 480 Peppermill Creek

City

Kissimmee

State

FL

Zip Code

34758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410886

Amount of Each Receipt this Period

450.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Danny Johnson

Mailing Address 480 Peppermill Creek

City

Kissimmee

State

FL

Zip Code

34758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410887

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Joshua Johnson

Mailing Address 433 Fieldstream Blvd. N

City

Orlando

State

FL

Zip Code

32825

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410888

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Jeffrey Johnston

Mailing Address 2162 Linwood Avenue

City

Spring Hill

State

FL

Zip Code

34608-4953

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410889

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Natalie Kane

Mailing Address 10112 Downey Lane

City

Tampa

State

FL

Zip Code

33626

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410890

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Michael Keller

Mailing Address 1322 Flaxwood Avenue

City

Brandon

State

FL

Zip Code

33511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410891

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Edwin Kennedy

Mailing Address PO Box 11835

City

Fort Lauderdale

State

FL

Zip Code

33339

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410892

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Douglas Kenny

Mailing Address 11414 Rustic Pine Court

City

Riverview

State

FL

Zip Code

33569

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Precision Communication  
Serv.

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Transaction ID: 71015.C1408671

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Janice Kerekes

Mailing Address 1794 Southlake Drive

City

Middleburg

State

FL

Zip Code

32068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clay County School Board

Occupation  
Education

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410893

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Richard Kettering

Mailing Address 308 Loon Avenue

City

Sebring

State

FL

Zip Code

33872-3765

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 7

Transaction ID: 71108.C1412030

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Norma Killpack

Mailing Address 1520 Oak Harbor Boulevard, Apt. 2

City

Vero Beach

State

FL

Zip Code

32967-7419

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71108.C1411513

Amount of Each Receipt this Period

200.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Norma Killpack

Mailing Address 1520 Oak Harbor Boulevard, Apt. 2

City

Vero Beach

State

FL

Zip Code

32967-7419

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71029.C1410931

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Jewel Kintzinger

Mailing Address 16800 Gulf Blvd., Apt. 10

City

Saint Petersburg

State

FL

Zip Code

33708-1466

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71015.C1409085

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John Konkus

Mailing Address 2333 SE 18th Circle

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Of Florida

Occupation

Congressional Office Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410896

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 224

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Janet Kovach

Mailing Address 8214 Revele Road

City

Riverview

State

FL

Zip Code

33569

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
C F Industries IncOccupation  
Phosphates

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	7

Transaction ID: 71029.C1410897

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Jeffrey Krauskopf

Mailing Address Post Office Box 1225

City

Stuart

State

FL

Zip Code

34995

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employedOccupation  
real estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	7

Transaction ID: 71016.C1409674

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Michael Lafferty

Mailing Address 5010 Harmony Circle, No. 104

City

Vero Beach

State

FL

Zip Code

32967

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Lafferty GroupOccupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	7

Transaction ID: 71029.C1410898

Amount of Each Receipt this Period

150.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

550.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Nicholas Lally

Mailing Address 1301 64th Street West

City

Bradenton

State

FL

Zip Code

34209-4550

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71029.C1411162

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Thomas Langford

Mailing Address 6650 NE 55th Street

City

High Springs

State

FL

Zip Code

32643

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gilchrist County School  
Board

Occupation  
commissioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410899

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Angie Langley

Mailing Address 969 W. Lakeshore Drive

City

Clermont

State

FL

Zip Code

34711-2978

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Langley Consulting

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410900

Amount of Each Receipt this Period

300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Henry Lanteigne

Mailing Address 4545 De Leon Place

City

Saint Augustine

State

FL

Zip Code

32095-6073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 7

Transaction ID: 71108.C1412127

Amount of Each Receipt this Period

65.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Wilhelm Lapica

Mailing Address 16491 SW 50th Terrace

City

Miami

State

FL

Zip Code

33185

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410814

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Karen Lee

Mailing Address 1223 Golden Pond Lane

City

Rockledge

State

FL

Zip Code

32955-4642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brevard Community College

Occupation  
Instructor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410901

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

465.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Frederick Leonhardt

Mailing Address 1317 Spring Lake Drive

City

Orlando

State

FL

Zip Code

32804-7114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gray Robinson

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410902

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Harvey Lester

Mailing Address 3990 Aiken Road

City

Pensacola

State

FL

Zip Code

32503-3302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1410464

Amount of Each Receipt this Period

65.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Barbara Lewis

Mailing Address PO Box 273

City

Baker

State

FL

Zip Code

32531

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410903

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

365.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Richard Lewis

Mailing Address 4551 Gulf Shore Blvd. N., Apt. 804

City

Naples

State

FL

Zip Code

34103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411341

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Gregory Lignelli

Mailing Address 16188 Crown Arbor Way

City

Fort Myers

State

FL

Zip Code

33908-5617

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410905

Amount of Each Receipt this Period

300.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Linda Long

Mailing Address 1233 N. Gulfstream Avenue

City

Sarasota

State

FL

Zip Code

34236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410906

Amount of Each Receipt this Period

300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

William Lusk

Mailing Address 7239 Hatteras Drive

City

Hudson

State

FL

Zip Code

34667

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410908

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Thomas Mack

Mailing Address 1402 Pine Street

City

Key West

State

FL

Zip Code

33040-7245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410909

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Robert Mahr

Mailing Address 24460 Woodsage Drive

City

Bonita Springs

State

FL

Zip Code

34134-7959

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 7

Transaction ID: 71017.C1409793

Amount of Each Receipt this Period

600.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

John Manna

Mailing Address 5838 Roble Loma Drive

City

Pensacola

State

FL

Zip Code

32526-2217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71030.C1411179

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Roy E. Martin

Mailing Address 11283 Hickory Ridge Court

City

Spring Hill

State

FL

Zip Code

34609-9664

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Fisheries Inst.

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410910

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Tom Matey

Mailing Address 5100 Ocean Boulevard

City

Cocoa Beach

State

FL

Zip Code

32931-3734

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C1409145

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Mathew Matisak

Mailing Address 794 Seneca Meadows Road

City State Zip Code  
Winter Springs FL 32708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Convergys Technical Train-  
ing

Occupation  
Senior Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410912

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

David Maymon

Mailing Address 175 Strafford Avenue, Ste. One-509

City State Zip Code  
Wayne PA 19087

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alliance Home Care Servic-  
es, I

Occupation  
Health Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410913

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Diane Mc Kechnie

Mailing Address E 10th Street

City State Zip Code  
Stuart FL 34997

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71016.C1409695

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Samuel McClelland

Mailing Address 202 Orangeview Avenue

City

Clearwater

State

FL

Zip Code

33755-5045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pinellas County

Occupation

Deputy tax collector

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410917

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Ann McClintock

Mailing Address 1876 SW 53rd Avenue

City

Plantation

State

FL

Zip Code

33317-6015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411552

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Robert McElowney

Mailing Address 111 Moorings Park Drive, Apt. 117

City

Naples

State

FL

Zip Code

34105-2173

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 71029.C1410344

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 62 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Debra McElroy

Mailing Address 16628 NW CR 1491

City

Alachua

State

FL

Zip Code

32615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alachua County

Occupation

Deputy tax collector

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410918

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Joshua McGrail

Mailing Address 10854 Pond Ridge Drive

City

Fort Myers

State

FL

Zip Code

33913

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McGrail Media, Inc.

Occupation

media

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410919

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Clarence McKee

Mailing Address 7984 NW 111th Way

City

Parkland

State

FL

Zip Code

33076-4707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ruden McCloskey

Occupation

Consultant

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410921

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Ellen McKnight

Mailing Address 20 Highpoint Drive

City

Gulf Breeze

State

FL

Zip Code

32561-4069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gulf Coast Orthopedics

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410923

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Donald McPherson

Mailing Address 100 Glenview Place, Apt. 1006

City

Naples

State

FL

Zip Code

34108-3132

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71015.C1409061

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Robert Meador

Mailing Address 16401 NW 58th Avenue

City

Miami Lakes

State

FL

Zip Code

33014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410927

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

James Melton

Mailing Address 3539 Springville Drive

City

Valrico

State

FL

Zip Code

33594-6362

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 7

Transaction ID: 71015.C1408843

Amount of Each Receipt this Period

110.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Adele Merck

Mailing Address 1197 N. Lake Way

City

Palm Beach

State

FL

Zip Code

33480-3100

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71030.C1411202

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Deena Messinger

Mailing Address 1362 Knollwood Drive

City

Palm City

State

FL

Zip Code

34990

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71016.C1409690

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1360.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Anita Michaels

Mailing Address 425 Worth Avenue SE

City

Palm Beach

State

FL

Zip Code

33480-4508

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411742

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Frank Miglin

Mailing Address 2013 Sunset Drive, E-2, Unit 3

City

Bradenton

State

FL

Zip Code

34207-4567

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 71029.C1410332

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

James Miller

Mailing Address 103 Trio Court

City

Holly Hill

State

FL

Zip Code

32117-4937

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 71029.C1410203

Amount of Each Receipt this Period

15.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

165.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Mary Ellen Miller

Mailing Address 1198 S. Venetian Way, #307

City

Miami Beach

State

FL

Zip Code

33139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: 71108.C1411899

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

William Minshall

Mailing Address 5040 SW 9th Lane

City

Gainesville

State

FL

Zip Code

32607-3866

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71108.C1411480

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Albert Monis

Mailing Address 13335 Jubilee Road

City

Dade City

State

FL

Zip Code

33525-8146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 71029.C1410354

Amount of Each Receipt this Period

50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Jason Montes

Mailing Address 5906 N. Branch Avenue

City State Zip Code  
Tampa FL 33604

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410932

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Samuel Moon

Mailing Address 270 W 2nd Street

City State Zip Code  
Chuluota FL 32766

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Us Postal Service

Occupation  
Mail Carrier

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411940

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Gary Moorcroft

Mailing Address PO Box 1708

City State Zip Code  
Oldsmar FL 34677-1708

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PriceWaterhouse Coopers

Occupation  
Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410933

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

James Morris

Mailing Address 1801 Sycamore Valley Drive, #204

City

Reston

State

VA

Zip Code

20190

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northrop Grumman

Occupation  
Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C1409262

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Beverly Muntzing

Mailing Address 2101 N. Central

City

Kissimmee

State

FL

Zip Code

34741

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410935

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Janice Nairm

Mailing Address 254 Seaview Street

City

Melbourne Beach

State

FL

Zip Code

32951

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 7

Transaction ID: 71108.C1412176

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Brandon Neeld

Mailing Address 1218 NW 8th Place

City

Cape Coral

State

FL

Zip Code

33993-7204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410936

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Marcie Nelson

Mailing Address 296 Riverwood Drive

City

Orange Park

State

FL

Zip Code

32003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410937

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Benjamin Newman

Mailing Address 4573 Old Carriage

City

Oviedo

State

FL

Zip Code

32765

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bobo Ciotoli et al.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410938

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Daniel OKeefe

Mailing Address 2651 Cochise Trail

City

Winter Park

State

FL

Zip Code

32789-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harris Cotherman & OKeefe

Occupation  
Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410939

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

William Oliver

Mailing Address 2330 Beacon Drive

City

Port Charlotte

State

FL

Zip Code

33952-5624

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411334

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Robert Overall

Mailing Address 700 John Ringling Blvd., Apt. T-15

City

Sarasota

State

FL

Zip Code

34236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1410655

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Penelope Pajak

Mailing Address 2 Cliffwood Circle

City

Ormond Beach

State

FL

Zip Code

32174

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410943

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

James Passilla

Mailing Address PO Box 123

City

Windermere

State

FL

Zip Code

34786-0123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: 71029.C1410176

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Margaret Patchett

Mailing Address 415 Oak River Drive

City

Port Orange

State

FL

Zip Code

32127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410944

Amount of Each Receipt this Period

300.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Dorothy Patterson

Mailing Address 10000 Shelbyville Road  
Suite 100

City State Zip Code  
Louisville KY 40223

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
n/a

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 7

Transaction ID: 71108.C1412249

Amount of Each Receipt this Period

500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Ellene Pauley

Mailing Address PO Box 13064

City State Zip Code  
Tampa FL 33681-3064

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
n/a

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410945

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Joseph Perini

Mailing Address 13319 NW Maplewood Road

City State Zip Code  
Palm City FL 34990-8078

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411770

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Leonard Peterson

Mailing Address 10040 South US 301

City

Webster

State

FL

Zip Code

33597

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1410462

Amount of Each Receipt this Period

110.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Georgia Phillips

Mailing Address 3862 Cactus Lane

City

Mount Dora

State

FL

Zip Code

32757-5414

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410947

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Duane Pinnock

Mailing Address 151 Apalachee Lane

City

Jupiter

State

FL

Zip Code

33458-5269

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harvin Harvin & Pinnock

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410949

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

410.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Kay Poitras

Mailing Address 27 Lake Hamilton Beach

City

Haines City

State

FL

Zip Code

33844-8698

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Transaction ID: 71015.C1408781

Amount of Each Receipt this Period

75.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Kay Poitras

Mailing Address 27 Lake Hamilton Beach

City

Haines City

State

FL

Zip Code

33844-8698

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C1409194

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Rebecca Porter

Mailing Address 906 W. Keysville Road

City

Plant City

State

FL

Zip Code

33567

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410950

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

275.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Price

Mailing Address 909 24th Avenue West

City

Palmetto

State

FL

Zip Code

34221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410951

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Robert Qualls

Mailing Address 2100 S Ocean Lane, #601

City

Fort Lauderdale

State

FL

Zip Code

33316

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71016.C1409697

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Robert Qualls

Mailing Address 2100 S Ocean Lane, #601

City

Fort Lauderdale

State

FL

Zip Code

33316

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71016.C1409698

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Douglas Rankin

Mailing Address 761 17th Street SW

City

Naples

State

FL

Zip Code

34117-4458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410952

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Ralph Reahard

Mailing Address 15310 Amberly Drive Suite 250

City

Tampa

State

FL

Zip Code

33647-1642

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SNR Technology

Occupation  
Internet Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71015.C1409118

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Shirley Redman

Mailing Address 19 Lake Lorraine Circle

City

Shalimar

State

FL

Zip Code

32579-1617

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: 71029.C1410182

Amount of Each Receipt this Period

50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Ann L Reynolds

Mailing Address 5903 60th Place E

City

Palmetto

State

FL

Zip Code

34221-7044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

registered nurse

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410953

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Mary Roberts

Mailing Address 308 South 61st Avenue

City

Pensacola

State

FL

Zip Code

32506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410955

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Naomi Roberts

Mailing Address 5192 Rainey Avenue S

City

Orange Park

State

FL

Zip Code

32065-7218

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advanced Roofing Systems

Occupation

Part-Time Office Work

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410956

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 224

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Terence Rochford

Mailing Address 11623 Useppa Court

City

Naples

State

FL

Zip Code

34110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gulf Coast RealtyOccupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	7

Transaction ID: 71017.C1409807

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Godfrey Rockefeller

Mailing Address 401 E. Linton Avenue, Apt. 217

City

Delray Beach

State

FL

Zip Code

33483

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	7

Transaction ID: 71029.C1410869

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Christopher Rodgers

Mailing Address 555 Palm Way

City

Gulf Stream

State

FL

Zip Code

33483-7330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	7

Transaction ID: 71015.C1408807

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1400.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Patrick Rohling

Mailing Address 2418 Sylvan Chase

City

Orange Park

State

FL

Zip Code

32073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410957

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Sharon Rousey

Mailing Address 958 Cross Cut Way

City

Longwood

State

FL

Zip Code

32779

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410958

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Jeffrey Rubinoff

Mailing Address 2623 Lake Park Circle East

City

Davie

State

FL

Zip Code

33328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410959

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Alesia Russell

Mailing Address 302 Lincoln Court

City

Deerfield Beach

State

FL

Zip Code

33442

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City of Ft. Lauderdale

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410960

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Ira Sabin

Mailing Address 11399 Seagrass Circle

City

Boca Raton

State

FL

Zip Code

33498

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410961

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John Sampson

Mailing Address 9614 Parkwood Court

City

Fort Myers

State

FL

Zip Code

33908-2838

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 0 7

Transaction ID: 71029.C1411043

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

William Scully

Mailing Address 771 Manatee Cove

City

Vero Beach

State

FL

Zip Code

32963-3450

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411737

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Daniel Sexton

Mailing Address 1964 Pleasant Hill Road

City

Kissimmee

State

FL

Zip Code

34746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kissimmee Flowers

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410967

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Carol Sharp

Mailing Address 1040 View Pointe Way

City

Lakeland

State

FL

Zip Code

33813

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 7

Transaction ID: 71017.C1409766

Amount of Each Receipt this Period

50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Harry Shepard

Mailing Address 108 Guadeloupe Lane

City

Bonita Springs

State

FL

Zip Code

34134-8517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 7

Transaction ID: 71108.C1412184

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Beth Shields

Mailing Address 22153 Snow Hill Road

City

Brooksville

State

FL

Zip Code

34601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410971

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Richard Sibert

Mailing Address 1911 Blue Ridge Avenue

City

Melbourne

State

FL

Zip Code

32935-2141

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Diversified Construction &  
Mai

Occupation  
Supervisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71029.C1410830

Amount of Each Receipt this Period

15.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

265.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 224

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Sharon Smith

Mailing Address 2506 Little Cove Rd

City

Owens Cross Roads

State

AL

Zip Code

35763-8746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

Transaction ID: 71029.C1410973

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John Spears

Mailing Address 1285 Gulf Shore Boulevard N., Apt.

City

Naples

State

FL

Zip Code

34102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tweedy, Browne Co. LLC

Occupation

Investment Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	7

Transaction ID: 71029.C1410190

Amount of Each Receipt this Period

1000.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Donald Sperry

Mailing Address 4877 Annette Drive

City

Tallahassee

State

FL

Zip Code

32303-7961

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	0	7

Transaction ID: 71029.C1410566

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Philip Stanton

Mailing Address PO Box 2127

City

Spokane

State

WA

Zip Code

99210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71030.C1411279

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Darren Steele

Mailing Address 2452 SW Estella Terrace

City

Palm City

State

FL

Zip Code

34990-3180

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation

Chiropractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71016.C1409685

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Jean Sterner

Mailing Address 13108 Anderson Hill Road

City

Clermont

State

FL

Zip Code

34711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410975

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Richard Stevens

Mailing Address 3091 Highland Bridge Road

City

Sarasota

State

FL

Zip Code

34235-2328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 7

Transaction ID: 71015.C1408686

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Lyttleton Stewart

Mailing Address 2309 Hickory Creek Terrace, Apt. 2

City

Richmond

State

VA

Zip Code

23294

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Publix

Occupation  
Pharmacist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410977

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Wayne H. Stewart

Mailing Address 276 Vista Court

City

Vero Beach

State

FL

Zip Code

32962-0759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411741

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 224

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

J. Charles Stracuzzi

Mailing Address 3201 SE Court Drive

City

Stuart

State

FL

Zip Code

34997

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	7

Transaction ID: 71016.C1409683

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Dorli Tanner

Mailing Address 838 Poinsetta Drive

City

Indian Harbour Bea

State

FL

Zip Code

32937-3548

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	5	/	2	0	0	7

Transaction ID: 71108.C1411739

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Susan Tharp

Mailing Address 2763 Galindo Circle

City

Viera

State

FL

Zip Code

32940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	7

Transaction ID: 71029.C1410982

Amount of Each Receipt this Period

150.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Peter Thomas

Mailing Address 2658 Gordon Drive

City

Naples

State

FL

Zip Code

34102-7758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Swanson Publishing

Occupation  
narrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411732

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Barbara R. Tilney

Mailing Address 5725 North A1A

City

Indian River Shore

State

FL

Zip Code

32963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410983

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Charles Tiseo

Mailing Address 515 Bentley Drive

City

Naples

State

FL

Zip Code

34110-8621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71108.C1411631

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Elizabeth Tompkins

Mailing Address 1706 S. Kings Avenue

City

Brandon

State

FL

Zip Code

33511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 7

Transaction ID: 71108.C1411938

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Joseph Townsend

Mailing Address 12474 SE 93rd Court Road

City

Summerfield

State

FL

Zip Code

34491-9722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 7

Transaction ID: 71015.C1408918

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Joseph Townsend

Mailing Address 12474 SE 93rd Court Road

City

Summerfield

State

FL

Zip Code

34491-9722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411346

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Timothy Truesdell

Mailing Address 950 N. Collier Blvd., Ste. 428

City State Zip Code

Marco Island

FL

34145

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation

Investment Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1411004

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Richard Tuck

Mailing Address 1611 Sand Wedge Court

City State Zip Code

Sebring

FL

33872

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411909

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Irmgard Ullius

Mailing Address 2832 Airport Road

City State Zip Code

Panama City

FL

32405-2850

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: 71108.C1412132

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

John Unkles

Mailing Address 3474 Lantern Bay Drive

City

Jupiter

State

FL

Zip Code

33477-1312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411368

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Maureen Vaillancourt

Mailing Address 2095 SW Gull Harbor Lane

City

Palm City

State

FL

Zip Code

34990

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Vaillancourt Realty Group

Occupation  
real estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71016.C1409681

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Maureen Vaillancourt

Mailing Address 2095 SW Gull Harbor Lane

City

Palm City

State

FL

Zip Code

34990

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Vaillancourt Realty Group

Occupation  
real estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 7

Transaction ID: 71016.C1409680

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Hal Valeche

Mailing Address 127 Viera Drive

City

Palm Beach Gardens

State

FL

Zip Code

33418-7802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410985

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Sandra Van Oosten

Mailing Address 2723 Horseshoe Drive

City

Plant City

State

FL

Zip Code

33566

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410986

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Jacques Vinmont

Mailing Address 21 Aspen Court

City

Boynton Beach

State

FL

Zip Code

33436-6615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 71029.C1410406

Amount of Each Receipt this Period

500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Charles Virgin

Mailing Address 2700 SW 3rd Avenue, Suite 1B

City

Miami

State

FL

Zip Code

33129-2318

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Doctor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 7

Transaction ID: 71029.C1410646

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

David Voelker

Mailing Address 16 Tarpon Avenue

City

Ormond Beach

State

FL

Zip Code

32176-2144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410987

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John Vogler

Mailing Address 11451 SW 3rd Street

City

Plantation

State

FL

Zip Code

33325-2905

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Vogler Equipment Co.

Occupation  
Corp. President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 7

Transaction ID: 71029.C1411051

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Anne Voss

Mailing Address 5020 Bayshore Boulevard, Apt. 40

City

Tampa

State

FL

Zip Code

33611-5346

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410988

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Robert Waechter

Mailing Address 6539 Peacock Road

City

Sarasota

State

FL

Zip Code

34242-2548

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410989

Amount of Each Receipt this Period

300.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Walter Warden

Mailing Address 4401 Gulf Shore Boulevard N, #302

City

Naples

State

FL

Zip Code

34103-3401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71029.C1411170

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 / 224

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Betty Jean Wegman

Mailing Address 11324 McMullen Loop

City

Riverview

State

FL

Zip Code

33569

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

Transaction ID: 71029.C1410993

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Linda Wells

Mailing Address PO Box 623

City

San Mateo

State

FL

Zip Code

32187-0623

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	7

Transaction ID: 71029.C1410994

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

James E. Westfall

Mailing Address 1035 Mayflower Avenue

City

Melbourne

State

FL

Zip Code

32940-6731

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	7

Transaction ID: 71108.C1411351

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Mary Ann Williams

Mailing Address 4 La Gorce Circle

City

Miami Beach

State

FL

Zip Code

33141

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: 71015.C1409160

Amount of Each Receipt this Period

200.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Mary Ann Williams

Mailing Address 4 La Gorce Circle

City

Miami Beach

State

FL

Zip Code

33141

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1411122

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Andrew Winkler

Mailing Address 6435 92nd Place

City

Pinellas Park

State

FL

Zip Code

33782-4631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Financial Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410997

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

John Winters

Mailing Address 1020 Saint James Lane

City

Vero Beach

State

FL

Zip Code

32967-7335

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 7

Transaction ID: 71029.C1410569

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Candace Wixman

Mailing Address 5705 Thunder Road

City

Sebring

State

FL

Zip Code

33876-5401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 7

Transaction ID: 71029.C1410999

Amount of Each Receipt this Period

150.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ronald Wood

Mailing Address 1905 West Kirby Street

City

Tampa

State

FL

Zip Code

33604-4607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

Transaction ID: 71029.C1410819

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Jennifer Woodbury

Mailing Address 912 S Lake Adair Blvd.

City

Orlando

State

FL

Zip Code

32804-6206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 2 / 2 0 0 7

Transaction ID: 71015.C1408827

Amount of Each Receipt this Period

300.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Michaelon Wright

Mailing Address 530 Ocean Drive #1002

City

Juno Beach

State

FL

Zip Code

33408-1948

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

Transaction ID: 71017.C1409742

Amount of Each Receipt this Period

500.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Samuel Wright

Mailing Address 5741 SW 172nd Loop

City

Ocala

State

FL

Zip Code

34473-4672

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: 71029.C1410327

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 / 224

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

John Zartman

Mailing Address 2701 Regency Oaks Blvd., Apt. N-4

City

Clearwater

State

FL

Zip Code

33759-1575

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1412059

Amount of Each Receipt this Period

150.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

John Zartman

Mailing Address 2701 Regency Oaks Blvd., Apt. N-4

City

Clearwater

State

FL

Zip Code

33759-1575

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411914

Amount of Each Receipt this Period

150.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

54494.84

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 224

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

United States Treasury

Mailing Address PO Box 149195

City

Austin

State

TX

Zip Code

78714-9195

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Government

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

9003.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 7

Transaction ID: 71108.C1411925

Amount of Each Receipt this Period

9003.00

Offsets to Operating Expe-  
nditu

SUBTOTAL of Receipts This Page (optional) .....

9003.00

TOTAL This Period (last page this line number only) .....

9003.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 224

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)

Suntrust Bank

Mailing Address 215 S Monroe Street, Suite 120

City

Tallahassee

State

FL

Zip Code

32301-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
bank

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

46427.65

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: 71108.C1411921

Amount of Each Receipt this Period

4075.03

Other Receipt

NOTE:interest

**B.**

Full Name (Last, First, Middle Initial)

Suntrust Bank

Mailing Address 215 S Monroe Street, Suite 120

City

Tallahassee

State

FL

Zip Code

32301-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/a

Occupation  
bank

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

47308.44

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 1 / 2 0 0 7

Transaction ID: 71108.C1411920

Amount of Each Receipt this Period

880.79

Other Receipt

NOTE:interest

**SUBTOTAL** of Receipts This Page (optional) .....

4955.82

**TOTAL** This Period (last page this line number only) .....

4955.82

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 224

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) EDonation.com	<b>Transaction ID:</b> 71015.E98104 <b>Date of Disbursement</b>																				
Mailing Address 118 North Saint Asaph Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
City Alexandria State VA Zip Code 22314-	Amount of Each Disbursement this Period																				
Purpose of Disbursement merchant discount Candidate Name	<table border="1"> <tr> <td colspan="10">750.45</td> </tr> </table>	750.45																			
750.45																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
MERCHANT DISCOUNT																					
<b>B.</b> Full Name (Last, First, Middle Initial) EDonation.com	<b>Transaction ID:</b> 71029.E98345 <b>Date of Disbursement</b>																				
Mailing Address 118 North Saint Asaph Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	2		2	0	0	7												
City Alexandria State VA Zip Code 22314-	Amount of Each Disbursement this Period																				
Purpose of Disbursement merchant discount Candidate Name	<table border="1"> <tr> <td colspan="10">165.75</td> </tr> </table>	165.75																			
165.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
MERCHANT DISCOUNT																					
<b>C.</b> Full Name (Last, First, Middle Initial) Hello Florida, Inc.	<b>Transaction ID:</b> 71120.E99341 <b>Date of Disbursement</b>																				
Mailing Address 4207 Vinland Rd., M15	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	6		2	0	0	7												
City Orlando State FL Zip Code 32811-	Amount of Each Disbursement this Period																				
Purpose of Disbursement shuttle service Candidate Name	<table border="1"> <tr> <td colspan="10">20195.20</td> </tr> </table>	20195.20																			
20195.20																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
SHUTTLE SERVICE																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**21111.40**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 102 / 224

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)  
Pennsylvania Avenue Strategies

Mailing Address 900 19th Street NW, 8th Floor

City Washington State DC Zip Code 20006-

Purpose of Disbursement  
consulting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71017.E98311

Date of Disbursement

10 / 11 / 2007

Amount of Each Disbursement this Period

6000.00

CONSULTING

**B.**

Full Name (Last, First, Middle Initial)  
Suntrust Bank

Mailing Address 215 S Monroe Street, Suite 120

City Tallahassee State FL Zip Code 32301-

Purpose of Disbursement  
merchant discount

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71018.E98340

Date of Disbursement

10 / 02 / 2007

Amount of Each Disbursement this Period

5.38

MERCHANT DISCOUNT

**C.**

Full Name (Last, First, Middle Initial)  
Suntrust Bank

Mailing Address 215 S Monroe Street, Suite 120

City Tallahassee State FL Zip Code 32301-

Purpose of Disbursement  
merchant discount

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71018.E98341

Date of Disbursement

10 / 05 / 2007

Amount of Each Disbursement this Period

253.00

MERCHANT DISCOUNT

**SUBTOTAL** of Disbursements This Page (optional) .....

6258.38

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 103 / 224

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

A.

Full Name (Last, First, Middle Initial)  
Suntrust Bank

Mailing Address 215 S Monroe Street, Suite 120

City Tallahassee State FL Zip Code 32301-

Purpose of Disbursement  
merchant discount

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 71015.E98057

Date of Disbursement

MM / DD / YYYY  
10 / 10 / 2007

Amount of Each Disbursement this Period

412.77

MERCHANT DISCOUNT

SUBTOTAL of Disbursements This Page (optional) .....

412.77

TOTAL This Period (last page this line number only) .....

27782.55

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 104 / 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)  
Clark Bensen

Mailing Address dba Polidata  
3112 Cave Court, Suite B

City Woodbridge State VA Zip Code 22192-1167

Purpose of Disbursement  
LEGAL FEES - RECOUNT FL13

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71108.E98943

Date of Disbursement

10 / 16 / 2007

Amount of Each Disbursement this Period

5005.00

**B.**

Full Name (Last, First, Middle Initial)  
Greenberg Traurig

Mailing Address 101 East College Avenue

City Tallahassee State FL Zip Code 32301-

Purpose of Disbursement  
LEGAL FEES - RECOUNT FL13

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71108.E98942

Date of Disbursement

10 / 16 / 2007

Amount of Each Disbursement this Period

25000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

30005.00

**TOTAL** This Period (last page this line number only) .....

30005.00



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 105 / 224

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<p><b>A.</b> Full Name (Last, First, Middle Initial) ADP, Inc.</p> <p>Mailing Address P O Box 9001006</p> <p>City Louisville State KY Zip Code 40290-</p> <p>Purpose of Disbursement payroll deductions &amp; taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71016.E98248  <b>Date of Disbursement</b>  <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>M M</span> <span>D D</span> <span>Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>1 0</span> <span>1 5</span> <span>2 0 0 7</span> </div> </div> </p> <p>Amount of Each Disbursement this Period  <div style="border: 1px solid black; padding: 2px; text-align: center;">4302.26</div> </p> <p><b>PAYROLL DEDUCTIONS &amp; TAXES</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) ADP, Inc.</p> <p>Mailing Address P O Box 9001006</p> <p>City Louisville State KY Zip Code 40290-</p> <p>Purpose of Disbursement FEA:payroll services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71108.E98990  <b>Date of Disbursement</b>  <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>M M</span> <span>D D</span> <span>Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>1 0</span> <span>3 0</span> <span>2 0 0 7</span> </div> </div> </p> <p>Amount of Each Disbursement this Period  <div style="border: 1px solid black; padding: 2px; text-align: center;">114.00</div> </p> <p><b>FEA:PAYROLL SERVICES</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) ADP, Inc.</p> <p>Mailing Address P O Box 9001006</p> <p>City Louisville State KY Zip Code 40290-</p> <p>Purpose of Disbursement payroll deductions &amp; taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 71108.E98396  <b>Date of Disbursement</b>  <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <span>M M</span> <span>D D</span> <span>Y Y Y Y</span> </div> <div style="display: flex; justify-content: space-between;"> <span>1 0</span> <span>3 0</span> <span>2 0 0 7</span> </div> </div> </p> <p>Amount of Each Disbursement this Period  <div style="border: 1px solid black; padding: 2px; text-align: center;">3906.04</div> </p> <p><b>PAYROLL DEDUCTIONS &amp; TAXES</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**8322.30**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 106 / 224

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) ADP, Inc.	<b>Transaction ID:</b> 71108.E98989
Mailing Address	Date of Disbursement
P O Box 9001006	<div> <div>10</div> <div>30</div> <div>2007</div> </div>
City Louisville	Amount of Each Disbursement this Period
State KY	<div>122.10</div>
Zip Code 40290-	
Purpose of Disbursement FEA:payroll services	
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>FEA:PAYROLL SERVICES</b>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	
<b>B.</b> Full Name (Last, First, Middle Initial) Ashley M Beach	<b>Transaction ID:</b> 71016.E98228
Mailing Address	Date of Disbursement
1686 N Mayfair Road	<div> <div>10</div> <div>15</div> <div>2007</div> </div>
City Fort Myers	Amount of Each Disbursement this Period
State FL	<div>1333.33</div>
Zip Code 33919-	
Purpose of Disbursement payroll	
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>PAYROLL</b>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	
<b>C.</b> Full Name (Last, First, Middle Initial) Ashley M Beach	<b>Transaction ID:</b> 71108.E98380
Mailing Address	Date of Disbursement
1686 N Mayfair Road	<div> <div>10</div> <div>30</div> <div>2007</div> </div>
City Fort Myers	Amount of Each Disbursement this Period
State FL	<div>1333.33</div>
Zip Code 33919-	
Purpose of Disbursement payroll	
Candidate Name	<div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<b>PAYROLL</b>
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	

**SUBTOTAL** of Disbursements This Page (optional) .....

**2788.76**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 107 / 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Ashley M Beach	<b>Transaction ID:</b> 71108.E98973 <b>Date of Disbursement</b>																				
Mailing Address 1686 N Mayfair Road	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
City State Zip Code Fort Myers FL 33919- Purpose of Disbursement car allowance Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>200.00</td> </tr> </table>	200.00																			
200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type CAR ALLOWANCE																				
<b>B.</b> Full Name (Last, First, Middle Initial) Joseph Byrd	<b>Transaction ID:</b> 71016.E98242 <b>Date of Disbursement</b>																				
Mailing Address 675 W Pensacola Street, Apt 4	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
City State Zip Code Tallahassee FL 32304- Purpose of Disbursement payroll Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>172.00</td> </tr> </table>	172.00																			
172.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type PAYROLL																				
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph Byrd	<b>Transaction ID:</b> 71108.E98391 <b>Date of Disbursement</b>																				
Mailing Address 675 W Pensacola Street, Apt 4	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
City State Zip Code Tallahassee FL 32304- Purpose of Disbursement payroll Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>188.00</td> </tr> </table>	188.00																			
188.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type PAYROLL																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**560.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Church	<b>Transaction ID:</b> 71017.E98271 Date of Disbursement
	Mailing Address 3810 Covington Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 4 / 2 0 0 7</div> </div>
	City Lakeland State FL Zip Code 33810-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement car allowance</div> <div>Candidate Name</div> <div>Category/ Type</div> </div>	<div>200.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	CAR ALLOWANCE
<b>B.</b>	Full Name (Last, First, Middle Initial) Mary Church	<b>Transaction ID:</b> 71016.E98235 Date of Disbursement
	Mailing Address 3810 Covington Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
	City Lakeland State FL Zip Code 33810-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement payroll</div> <div>Candidate Name</div> <div>Category/ Type</div> </div>	<div>1333.33</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	PAYROLL
<b>C.</b>	Full Name (Last, First, Middle Initial) Mary Church	<b>Transaction ID:</b> 71108.E98979 Date of Disbursement
	Mailing Address 3810 Covington Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 7</div> </div>
	City Lakeland State FL Zip Code 33810-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement car allowance</div> <div>Candidate Name</div> <div>Category/ Type</div> </div>	<div>200.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	CAR ALLOWANCE

**SUBTOTAL** of Disbursements This Page (optional) .....

**1733.33**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 109 / 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Mary Church	<b>Transaction ID:</b> 71108.E98386 <b>Date of Disbursement</b>																				
Mailing Address 3810 Covington Lane	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
City Lakeland State FL Zip Code 33810-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">1333.33</td> </tr> </table>	1333.33																			
1333.33																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
PAYROLL																					
<b>B.</b> Full Name (Last, First, Middle Initial) Jaimee Colley	<b>Transaction ID:</b> 71016.E98215 <b>Date of Disbursement</b>																				
Mailing Address 4298 Park Crossing Trail	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
City Tallahassee State FL Zip Code 32311-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">1592.97</td> </tr> </table>	1592.97																			
1592.97																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
PAYROLL																					
<b>C.</b> Full Name (Last, First, Middle Initial) Jaimee Colley	<b>Transaction ID:</b> 71108.E99018 <b>Date of Disbursement</b>																				
Mailing Address 4298 Park Crossing Trail	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
City Tallahassee State FL Zip Code 32311-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">1181.38</td> </tr> </table>	1181.38																			
1181.38																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type																					
PAYROLL																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**4107.68**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)  
Jaimee Colley

Mailing Address 4298 Park Crossing Trail

City Tallahassee State FL Zip Code 32311-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71108.E98366

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1592.97

PAYROLL

**B.**

Full Name (Last, First, Middle Initial)  
John F. Davis

Mailing Address 694 Seabrook Court, Apt 204

City Altamonte Springs State FL Zip Code 32714-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71016.E98229

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1875.00

PAYROLL

**C.**

Full Name (Last, First, Middle Initial)  
John F. Davis

Mailing Address 694 Seabrook Court, Apt 204

City Altamonte Springs State FL Zip Code 32714-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71108.E98381

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1875.00

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

5342.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 111 / 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Pablo M. Diaz	<b>Transaction ID:</b> 71016.E98230 <b>Date of Disbursement</b>																				
Mailing Address 3610 Four Oaks Blvd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
City Tallahassee State FL Zip Code 32311-3309	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type PAYROLL																					
<b>B.</b> Full Name (Last, First, Middle Initial) Pablo M. Diaz	<b>Transaction ID:</b> 71108.E98382 <b>Date of Disbursement</b>																				
Mailing Address 3610 Four Oaks Blvd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
City Tallahassee State FL Zip Code 32311-3309	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type PAYROLL																					
<b>C.</b> Full Name (Last, First, Middle Initial) James A. Greer	<b>Transaction ID:</b> 71016.E98216 <b>Date of Disbursement</b>																				
Mailing Address 1205 Prestige Point	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
City Oviedo State FL Zip Code 32765-	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">5416.67</td> </tr> </table>	5416.67																			
5416.67																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type PAYROLL																					

**SUBTOTAL** of Disbursements This Page (optional) .....

10416.67

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)  
James A. Greer

Mailing Address 1205 Prestige Point

City Oviedo State FL Zip Code 32765-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 71108.E98367

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5416.67

PAYROLL

**B.**

Full Name (Last, First, Middle Initial)  
Jedidiah Hall

Mailing Address 2021 Continental Avenue

City Tallahassee State FL Zip Code 32304-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 71016.E98231

Date of Disbursement

/   /

Amount of Each Disbursement this Period

693.33

PAYROLL

**C.**

Full Name (Last, First, Middle Initial)  
Katherine N. Howard

Mailing Address 885 East Dogwood Street

City Monticello State FL Zip Code 32344-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 71016.E98217

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2119.66

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

8229.66

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

PAGE 113 / 224

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Katherine N. Howard	<b>Transaction ID:</b> 71108.E98368 <b>Date of Disbursement</b>
Mailing Address 885 East Dogwood Street	<div> <div>10</div> <div>30</div> <div>2007</div> </div>
City Monticello State FL Zip Code 32344-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll Candidate Name	<div>2119.66</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Delmar W. Johnson III	<b>Transaction ID:</b> 71016.E98218 <b>Date of Disbursement</b>
Mailing Address 128 Tildenville School Road	<div> <div>10</div> <div>15</div> <div>2007</div> </div>
City Winter Garden State FL Zip Code 34787-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll Candidate Name	<div>2833.33</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Delmar W. Johnson III	<b>Transaction ID:</b> 71108.E98369 <b>Date of Disbursement</b>
Mailing Address 128 Tildenville School Road	<div> <div>10</div> <div>30</div> <div>2007</div> </div>
City Winter Garden State FL Zip Code 34787-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll Candidate Name	<div>2833.33</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**7786.32**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 114 / 224

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b>	Full Name (Last, First, Middle Initial) Scott D Kirby	<b>Transaction ID:</b> 71016.E98232 Date of Disbursement
	Mailing Address 3910 LK St George Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
	City State Zip Code Palm Harbor FL 34684-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement payroll</div> <div>Candidate Name</div> </div> <div> <div>Category/ Type</div> </div>	<div>1333.33</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	PAYROLL
<b>B.</b>	Full Name (Last, First, Middle Initial) Scott D Kirby	<b>Transaction ID:</b> 71108.E98383 Date of Disbursement
	Mailing Address 3910 LK St George Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 7</div> </div>
	City State Zip Code Palm Harbor FL 34684-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement payroll</div> <div>Candidate Name</div> </div> <div> <div>Category/ Type</div> </div>	<div>1333.33</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	PAYROLL
<b>C.</b>	Full Name (Last, First, Middle Initial) Scott D Kirby	<b>Transaction ID:</b> 71108.E98975 Date of Disbursement
	Mailing Address 3910 LK St George Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 7</div> </div>
	City State Zip Code Palm Harbor FL 34684-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement car allowance</div> <div>Candidate Name</div> </div> <div> <div>Category/ Type</div> </div>	<div>200.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	CAR ALLOWANCE

**SUBTOTAL** of Disbursements This Page (optional) .....

**2866.66**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 115 / 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Adam Long	<b>Transaction ID:</b> 71016.E98222 <b>Date of Disbursement</b>																				
Mailing Address 405 W. College Avenue, #313	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32302-</td> </tr> <tr> <td colspan="2">Purpose of Disbursement payroll</td> <td rowspan="2"><input type="checkbox"/> Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32302-	Purpose of Disbursement payroll		<input type="checkbox"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>865.33</td> </tr> </table>	865.33											
City Tallahassee	State FL	Zip Code 32302-																			
Purpose of Disbursement payroll		<input type="checkbox"/> Category/ Type																			
Candidate Name																					
865.33																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		<b>PAYROLL</b>														
Office Sought:	Disbursement For:																				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) Adam Long	<b>Transaction ID:</b> 71108.E98373 <b>Date of Disbursement</b>																				
Mailing Address 405 W. College Avenue, #313	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32302-</td> </tr> <tr> <td colspan="2">Purpose of Disbursement payroll</td> <td rowspan="2"><input type="checkbox"/> Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32302-	Purpose of Disbursement payroll		<input type="checkbox"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>953.33</td> </tr> </table>	953.33											
City Tallahassee	State FL	Zip Code 32302-																			
Purpose of Disbursement payroll		<input type="checkbox"/> Category/ Type																			
Candidate Name																					
953.33																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		<b>PAYROLL</b>														
Office Sought:	Disbursement For:																				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
<b>C.</b> Full Name (Last, First, Middle Initial) Kevin Maloney	<b>Transaction ID:</b> 71016.E98243 <b>Date of Disbursement</b>																				
Mailing Address 993 Point La Vista Road N	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
<table border="1"> <tr> <td>City Jacksonville</td> <td>State FL</td> <td>Zip Code 32207-</td> </tr> <tr> <td colspan="2">Purpose of Disbursement payroll</td> <td rowspan="2"><input type="checkbox"/> Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Jacksonville	State FL	Zip Code 32207-	Purpose of Disbursement payroll		<input type="checkbox"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>360.00</td> </tr> </table>	360.00											
City Jacksonville	State FL	Zip Code 32207-																			
Purpose of Disbursement payroll		<input type="checkbox"/> Category/ Type																			
Candidate Name																					
360.00																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House  <input type="checkbox"/> Senate  <input type="checkbox"/> President         </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:		<b>PAYROLL</b>														
Office Sought:	Disbursement For:																				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**2178.66**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)  
Cathleen McCarroll

Mailing Address 2403 Hartsfield Road, #103

City Tallahassee State FL Zip Code 32303-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71016.E98233

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1750.00

PAYROLL

**B.**

Full Name (Last, First, Middle Initial)  
Cathleen McCarroll

Mailing Address 2403 Hartsfield Road, #103

City Tallahassee State FL Zip Code 32303-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71108.E98384

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1750.00

PAYROLL

**C.**

Full Name (Last, First, Middle Initial)  
Jennifer McMillan

Mailing Address 928 B Carraway Street

City Tallahassee State FL Zip Code 32308-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71016.E98223

Date of Disbursement

/   /

Amount of Each Disbursement this Period

875.00

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

4375.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b>	Full Name (Last, First, Middle Initial) Jennifer McMillan	<b>Transaction ID:</b> 71108.E98374 Date of Disbursement
	Mailing Address 928 B Carraway Street	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 7</div> </div>
	City Tallahassee State FL Zip Code 32308-	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll	<div> <div></div> <div>875.00</div> </div>
	Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	PAYROLL
<b>B.</b>	Full Name (Last, First, Middle Initial) Timothy R Nungesser	<b>Transaction ID:</b> 71016.E98234 Date of Disbursement
	Mailing Address 3395 Wedgewood Drive, Apt 204	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
	City Palm Bay State FL Zip Code 32905-	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll	<div> <div></div> <div>1250.00</div> </div>
	Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	PAYROLL
<b>C.</b>	Full Name (Last, First, Middle Initial) Timothy R Nungesser	<b>Transaction ID:</b> 71108.E98385 Date of Disbursement
	Mailing Address 3395 Wedgewood Drive, Apt 204	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 7</div> </div>
	City Palm Bay State FL Zip Code 32905-	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll	<div> <div></div> <div>1250.00</div> </div>
	Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

**3375.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)  
Timothy R Nungesser

Mailing Address 3395 Wedgewood Drive, Apt 204

City State Zip Code  
Palm Bay FL 32905-

Purpose of Disbursement  
car allowance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71108.E98977

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 30 2007

Amount of Each Disbursement this Period

200.00

CAR ALLOWANCE

**B.**

Full Name (Last, First, Middle Initial)  
Jonathan Kirk Pepper

Mailing Address 3105 Mist Flower Road

City State Zip Code  
Tallahassee FL 32311-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71016.E98244

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 15 2007

Amount of Each Disbursement this Period

3208.33

PAYROLL

**C.**

Full Name (Last, First, Middle Initial)  
Jonathan Kirk Pepper

Mailing Address 3105 Mist Flower Road

City State Zip Code  
Tallahassee FL 32311-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71108.E98392

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
10 30 2007

Amount of Each Disbursement this Period

3208.33

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

6616.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Jeffrey Phillips	<b>Transaction ID:</b> 71016.E98236 <b>Date of Disbursement</b>
Mailing Address 1037 High Meadow Drive	<div> <div>10</div> <div>15</div> <div>2007</div> </div>
City Tallahassee State FL Zip Code 32311-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll	<div>1365.36</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Jason Poreda	<b>Transaction ID:</b> 71016.E98245 <b>Date of Disbursement</b>
Mailing Address 446 Conradi Street, Apt A323	<div> <div>10</div> <div>15</div> <div>2007</div> </div>
City Tallahassee State FL Zip Code 32304-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll	<div>1375.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Jason Poreda	<b>Transaction ID:</b> 71108.E98393 <b>Date of Disbursement</b>
Mailing Address 446 Conradi Street, Apt A323	<div> <div>10</div> <div>30</div> <div>2007</div> </div>
City Tallahassee State FL Zip Code 32304-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll	<div>1375.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>PAYROLL</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**4115.36**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Emily Susan Rimes	<b>Transaction ID:</b> 71016.E98246 <b>Date of Disbursement</b>																				
Mailing Address 13230 Royal George Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
City Odessa State FL Zip Code 33556-	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll	<table border="1"> <tr> <td colspan="10">1947.50</td> </tr> </table>	1947.50																			
1947.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
PAYROLL																					
<b>B.</b> Full Name (Last, First, Middle Initial) Emily Susan Rimes	<b>Transaction ID:</b> 71108.E98394 <b>Date of Disbursement</b>																				
Mailing Address 13230 Royal George Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
City Odessa State FL Zip Code 33556-	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll	<table border="1"> <tr> <td colspan="10">1947.50</td> </tr> </table>	1947.50																			
1947.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
PAYROLL																					
<b>C.</b> Full Name (Last, First, Middle Initial) James C. Rimes	<b>Transaction ID:</b> 71016.E98219 <b>Date of Disbursement</b>																				
Mailing Address P O Box 10248	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
City Tallahassee State FL Zip Code 32302-	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll	<table border="1"> <tr> <td colspan="10">5416.67</td> </tr> </table>	5416.67																			
5416.67																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
PAYROLL																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**9311.67**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 121 / 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)  
James C. Rimes

Mailing Address P O Box 10248

City Tallahassee State FL Zip Code 32302-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71108.E98370

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

5416.67

PAYROLL

**B.**

Full Name (Last, First, Middle Initial)  
Kristin Seidel

Mailing Address 3045 Dickinson Drive

City Tallahassee State FL Zip Code 32311-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71016.E98225

Date of Disbursement

10 / 15 / 2007

Amount of Each Disbursement this Period

1125.00

PAYROLL

**C.**

Full Name (Last, First, Middle Initial)  
Kristin Seidel

Mailing Address 3045 Dickinson Drive

City Tallahassee State FL Zip Code 32311-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 71108.E98377

Date of Disbursement

10 / 30 / 2007

Amount of Each Disbursement this Period

1125.00

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

7666.67

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Cheryl Seinfeld Mailing Address 4059 Colleton Court	<b>Transaction ID:</b> 71016.E98226 <b>Date of Disbursement</b> <div> <div>10</div> <div>15</div> <div>2007</div> </div>
City Tallahassee State FL Zip Code 32311- Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>2708.33</div> Category/Type PAYROLL
<b>B.</b> Full Name (Last, First, Middle Initial) Cheryl Seinfeld Mailing Address 4059 Colleton Court City Tallahassee State FL Zip Code 32311- Purpose of Disbursement payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 71108.E98378 <b>Date of Disbursement</b> <div> <div>10</div> <div>30</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2708.33</div> Category/Type PAYROLL
<b>C.</b> Full Name (Last, First, Middle Initial) Thomas B. Sutton Mailing Address 357 John Anderson Drive City Ormond Beach State FL Zip Code 32176- Purpose of Disbursement car allowance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 71017.E98268 <b>Date of Disbursement</b> <div> <div>10</div> <div>04</div> <div>2007</div> </div> <b>Amount of Each Disbursement this Period</b> <div>200.00</div> Category/Type CAR ALLOWANCE

**SUBTOTAL** of Disbursements This Page (optional) .....

**5616.66**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 123 / 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas B. Sutton	<b>Transaction ID:</b> 71016.E98237 <b>Date of Disbursement</b>																				
Mailing Address 357 John Anderson Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
<table border="1"> <tr> <td>City Ormond Beach</td> <td>State FL</td> <td>Zip Code 32176-</td> </tr> <tr> <td colspan="2">Purpose of Disbursement payroll</td> <td rowspan="2"><input type="checkbox"/> Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Ormond Beach	State FL	Zip Code 32176-	Purpose of Disbursement payroll		<input type="checkbox"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>1365.36</td> </tr> </table>	1365.36											
City Ormond Beach	State FL	Zip Code 32176-																			
Purpose of Disbursement payroll		<input type="checkbox"/> Category/ Type																			
Candidate Name																					
1365.36																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Gregory J Ungru	<b>Transaction ID:</b> 71016.E98247 <b>Date of Disbursement</b>																				
Mailing Address 3869 Overlook Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32311-</td> </tr> <tr> <td colspan="2">Purpose of Disbursement payroll</td> <td rowspan="2"><input type="checkbox"/> Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32311-	Purpose of Disbursement payroll		<input type="checkbox"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2166.67</td> </tr> </table>	2166.67											
City Tallahassee	State FL	Zip Code 32311-																			
Purpose of Disbursement payroll		<input type="checkbox"/> Category/ Type																			
Candidate Name																					
2166.67																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Gregory J Ungru	<b>Transaction ID:</b> 71108.E98395 <b>Date of Disbursement</b>																				
Mailing Address 3869 Overlook Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
<table border="1"> <tr> <td>City Tallahassee</td> <td>State FL</td> <td>Zip Code 32311-</td> </tr> <tr> <td colspan="2">Purpose of Disbursement payroll</td> <td rowspan="2"><input type="checkbox"/> Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Tallahassee	State FL	Zip Code 32311-	Purpose of Disbursement payroll		<input type="checkbox"/> Category/ Type	Candidate Name		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>2166.67</td> </tr> </table>	2166.67											
City Tallahassee	State FL	Zip Code 32311-																			
Purpose of Disbursement payroll		<input type="checkbox"/> Category/ Type																			
Candidate Name																					
2166.67																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

5698.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 124 / 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Erin J. Vansickle	<b>Transaction ID:</b> 71016.E98224 <b>Date of Disbursement</b>																				
Mailing Address 417 West 7th Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
City Tallahassee State FL Zip Code 32303- Purpose of Disbursement payroll Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2</td><td>2</td><td>9</td><td>1</td><td>.</td><td>6</td><td>6</td> </tr> </table>	2	2	9	1	.	6	6													
2	2	9	1	.	6	6															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type PAYROLL																				
<b>B.</b> Full Name (Last, First, Middle Initial) Erin J. Vansickle	<b>Transaction ID:</b> 71108.E98375 <b>Date of Disbursement</b>																				
Mailing Address 417 West 7th Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
City Tallahassee State FL Zip Code 32303- Purpose of Disbursement payroll Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2</td><td>2</td><td>9</td><td>1</td><td>.</td><td>6</td><td>6</td> </tr> </table>	2	2	9	1	.	6	6													
2	2	9	1	.	6	6															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type PAYROLL																				
<b>C.</b> Full Name (Last, First, Middle Initial) Armando Vilaboy	<b>Transaction ID:</b> 71016.E98238 <b>Date of Disbursement</b>																				
Mailing Address 53 SW 98th Avenue	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
City Miami State FL Zip Code 33174- Purpose of Disbursement payroll Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1</td><td>3</td><td>7</td><td>5</td><td>.</td><td>0</td><td>0</td> </tr> </table>	1	3	7	5	.	0	0													
1	3	7	5	.	0	0															
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type PAYROLL																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**5958.32**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 125 / 224

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
 Republican Party of Florida

<b>A.</b>	Full Name (Last, First, Middle Initial) Armando Vilaboy	<b>Transaction ID:</b> 71108.E98978 <b>Date of Disbursement</b>
	Mailing Address 53 SW 98th Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 7</div> </div>
	City Miami State FL Zip Code 33174-	<b>Amount of Each Disbursement this Period</b>
	<div> <div>Purpose of Disbursement car allowance</div> <div>Candidate Name</div> <div>Category/ Type</div> </div>	<div>200.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>CAR ALLOWANCE</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Armando Vilaboy	<b>Transaction ID:</b> 71108.E98387 <b>Date of Disbursement</b>
	Mailing Address 53 SW 98th Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 7</div> </div>
	City Miami State FL Zip Code 33174-	<b>Amount of Each Disbursement this Period</b>
	<div> <div>Purpose of Disbursement payroll</div> <div>Candidate Name</div> <div>Category/ Type</div> </div>	<div>1375.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>PAYROLL</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Antoinette Walwyn	<b>Transaction ID:</b> 71016.E98220 <b>Date of Disbursement</b>
	Mailing Address 14352 Colonial Grand, #2506	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
	City Orlando State FL Zip Code 32837-	<b>Amount of Each Disbursement this Period</b>
	<div> <div>Purpose of Disbursement payroll</div> <div>Candidate Name</div> <div>Category/ Type</div> </div>	<div>1250.00</div>
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	<b>PAYROLL</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2825.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 126 / 224

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b>	Full Name (Last, First, Middle Initial) Antoinette Walwyn	<b>Transaction ID:</b> 71108.E98371 Date of Disbursement
	Mailing Address 14352 Colonial Grand, #2506	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 7</div> </div>
	City Orlando State FL Zip Code 32837-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement payroll</div> <div>Candidate Name</div> </div> <div>Category/ Type</div>	<div>1250.00</div>
	<div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div>	PAYROLL
<b>B.</b>	Full Name (Last, First, Middle Initial) Heidi Watzak	<b>Transaction ID:</b> 71016.E98239 Date of Disbursement
	Mailing Address 4502 Santee Street	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 7</div> </div>
	City Orlando State FL Zip Code 32804-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement payroll</div> <div>Candidate Name</div> </div> <div>Category/ Type</div>	<div>1531.25</div>
	<div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div>	PAYROLL
<b>C.</b>	Full Name (Last, First, Middle Initial) Heidi Watzak	<b>Transaction ID:</b> 71108.E98388 Date of Disbursement
	Mailing Address 4502 Santee Street	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 3 0 / 2 0 0 7</div> </div>
	City Orlando State FL Zip Code 32804-	Amount of Each Disbursement this Period
	<div> <div>Purpose of Disbursement payroll</div> <div>Candidate Name</div> </div> <div>Category/ Type</div>	<div>1531.25</div>
	<div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div>	PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**4312.50**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 127 / 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Heidi Watzak	<b>Transaction ID:</b> 71108.E98972 <b>Date of Disbursement</b>																				
Mailing Address 4502 Santee Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
City Orlando State FL Zip Code 32804-	Amount of Each Disbursement this Period																				
Purpose of Disbursement car allowance Candidate Name	<table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table>	200.00																			
200.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type CAR ALLOWANCE																					
<b>B.</b> Full Name (Last, First, Middle Initial) Amanda Wheeler	<b>Transaction ID:</b> 71016.E98227 <b>Date of Disbursement</b>																				
Mailing Address 2740 W. Tharpe Street. #405	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	7												
City Tallahassee State FL Zip Code 32303-	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">815.00</td> </tr> </table>	815.00																			
815.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type PAYROLL																					
<b>C.</b> Full Name (Last, First, Middle Initial) Amanda Wheeler	<b>Transaction ID:</b> 71108.E98379 <b>Date of Disbursement</b>																				
Mailing Address 2740 W. Tharpe Street. #405	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	7												
City Tallahassee State FL Zip Code 32303-	Amount of Each Disbursement this Period																				
Purpose of Disbursement payroll Candidate Name	<table border="1"> <tr> <td colspan="10">820.00</td> </tr> </table>	820.00																			
820.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type PAYROLL																					

**SUBTOTAL** of Disbursements This Page (optional) .....

1835.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 128 / 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b>	Full Name (Last, First, Middle Initial) Danielle Will	Transaction ID: 71016.E98240 Date of Disbursement 10 / 15 / 2007
	Mailing Address 804 NW 99th Avenue	
	City Plantation State FL Zip Code 33324-	Amount of Each Disbursement this Period 1333.33
	Purpose of Disbursement payroll Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL
<b>B.</b>	Full Name (Last, First, Middle Initial) Danielle Will	Transaction ID: 71108.E98974 Date of Disbursement 10 / 30 / 2007
	Mailing Address 804 NW 99th Avenue	
	City Plantation State FL Zip Code 33324-	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement car allowance Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CAR ALLOWANCE
<b>C.</b>	Full Name (Last, First, Middle Initial) Danielle Will	Transaction ID: 71108.E98389 Date of Disbursement 10 / 30 / 2007
	Mailing Address 804 NW 99th Avenue	
	City Plantation State FL Zip Code 33324-	Amount of Each Disbursement this Period 1333.33
	Purpose of Disbursement payroll Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL

SUBTOTAL of Disbursements This Page (optional) .....

2866.66

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 129 / 224

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Clay W Williams	<b>Transaction ID:</b> 71016.E98241 <b>Date of Disbursement</b>
Mailing Address 2209 Victory Garden Circle	<div> <div>10</div> <div>15</div> <div>2007</div> </div>
City Tallahassee State FL Zip Code 32301-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll	<div>1250.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
PAYROLL	
<b>B.</b> Full Name (Last, First, Middle Initial) Clay W Williams	<b>Transaction ID:</b> 71108.E98976 <b>Date of Disbursement</b>
Mailing Address 2209 Victory Garden Circle	<div> <div>10</div> <div>30</div> <div>2007</div> </div>
City Tallahassee State FL Zip Code 32301-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement car allowance	<div>200.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
CAR ALLOWANCE	
<b>C.</b> Full Name (Last, First, Middle Initial) Clay W Williams	<b>Transaction ID:</b> 71108.E98390 <b>Date of Disbursement</b>
Mailing Address 2209 Victory Garden Circle	<div> <div>10</div> <div>30</div> <div>2007</div> </div>
City Tallahassee State FL Zip Code 32301-	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement payroll	<div>1250.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
PAYROLL	

**SUBTOTAL** of Disbursements This Page (optional) .....

2700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Florida

**A.**

Full Name (Last, First, Middle Initial)  
Susan Wright

Mailing Address 9763 S Horseshoe Road

City Tallahassee State FL Zip Code 32317-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 71016.E98221

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 0 / 1 5 / 2 0 0 7

Amount of Each Disbursement this Period

1208.33

PAYROLL

**B.**

Full Name (Last, First, Middle Initial)  
Susan Wright

Mailing Address 9763 S Horseshoe Road

City Tallahassee State FL Zip Code 32317-

Purpose of Disbursement  
payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 71108.E98372

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 0 / 3 0 / 2 0 0 7

Amount of Each Disbursement this Period

1208.33

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

2416.66

**TOTAL** This Period (last page this line number only) .....

124022.87

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 131 / 224

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Florida**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Public Opinion StrategiesNature of Debt (Purpose):  
survey

Mailing Address 214 North Fayette Street

City State ZIP Code  
Alexandria VA 22314-1540

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99285

Amount Incurred This Period

13000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Campaign Graphics CorporationNature of Debt (Purpose):  
signs

Mailing Address Post Office Box 4859

City State ZIP Code  
Ocala FL 34478-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99304

Amount Incurred This Period

14826.21

Payment This Period

0.00

Outstanding Balance at Close of This Period

14826.21

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Steve Brown Direct Mail, Inc.Nature of Debt (Purpose):  
fundraising consulting

Mailing Address 731 Divot Drive

City State ZIP Code  
Fernley NV 89408-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99296

Amount Incurred This Period

2000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

**1) SUBTOTALS** This Period This Page (optional).....

29826.21

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 132 / 224

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Florida**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Avis Rent-A-CarNature of Debt (Purpose):  
car rental

Mailing Address 7876 Collections Center Drive

City State ZIP Code  
Chicago IL 60693-

Outstanding Balance Beginning This Period

2371.87

Transaction ID: LS71017.E98278

Amount Incurred This Period

0.00

Payment This Period

2371.87

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Yuma Solutions, Inc.Nature of Debt (Purpose):  
hardware/software

Mailing Address P O Box 152075

City State ZIP Code  
Tampa FL 33684-

Outstanding Balance Beginning This Period

25320.79

Transaction ID: LS71017.E98259

Amount Incurred This Period

0.00

Payment This Period

25320.79

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Photography By ETNature of Debt (Purpose):  
photography

Mailing Address 1263 Walden Road

City State ZIP Code  
Tallahassee FL 32301-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99293

Amount Incurred This Period

700.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

700.00

**1) SUBTOTALS** This Period This Page (optional).....

700.00

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 133 / 224

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Florida**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Majority StrategiesNature of Debt (Purpose):  
invitations

Mailing Address 135 Professional Drive, S 104

City State ZIP Code  
Ponte Vedra Beach FL 32082-

Outstanding Balance Beginning This Period

2825.00

Transaction ID: LS71017.E98266

Amount Incurred This Period

0.00

Payment This Period

2825.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Red October ProductionsNature of Debt (Purpose):  
audio/video

Mailing Address 1825 K Street NW, Suite 507

City State ZIP Code  
Washington DC 20006-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99286

Amount Incurred This Period

10131.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10131.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
FLS Connect, LLCNature of Debt (Purpose):  
telemarketing

Mailing Address 7300 Hudson Blvd., Suite 270

City State ZIP Code  
Saint Paul MN 55128-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99283

Amount Incurred This Period

11674.05

Payment This Period

0.00

Outstanding Balance at Close of This Period

11674.05

1) **SUBTOTALS** This Period This Page (optional).....

21805.05

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 134 / 224

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Florida**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Richard E. CoatesNature of Debt (Purpose):  
legal fees

Mailing Address 200 W College Avenue, Suite 311B

City State ZIP Code  
Tallahassee FL 32301-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99302

Amount Incurred This Period

4000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Carroll & Company, CPAsNature of Debt (Purpose):  
accounting services

Mailing Address 2640-A Mitcham Drive

City State ZIP Code  
Tallahassee FL 32308-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99311

Amount Incurred This Period

9359.60

Payment This Period

0.00

Outstanding Balance at Close of This Period

9359.60

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Orange County Sheriffs OfficeNature of Debt (Purpose):  
security

Mailing Address 2500 W Colonial Drive

City State ZIP Code  
Orlando FL 32804-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99313

Amount Incurred This Period

11122.19

Payment This Period

0.00

Outstanding Balance at Close of This Period

11122.19

1) **SUBTOTALS** This Period This Page (optional).....

24481.79

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 135 / 224

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Florida**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Ausley & McMullenNature of Debt (Purpose):  
legal fees

Mailing Address PO Box 391

City State ZIP Code  
Tallahassee FL 32302-

Outstanding Balance Beginning This Period

7500.00

Transaction ID: LS71017.E98289

Amount Incurred This Period

0.00

Payment This Period

7500.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Pinnacle Direct, Inc.Nature of Debt (Purpose):  
direct mail production

Mailing Address 15260 113th Street North

City State ZIP Code  
Stillwater MN 55082-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99284

Amount Incurred This Period

10726.74

Payment This Period

0.00

Outstanding Balance at Close of This Period

10726.74

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Richard SwartzNature of Debt (Purpose):  
travel

Mailing Address 8900 Winged Foot Drive

City State ZIP Code  
Tallahassee FL 32312-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99287

Amount Incurred This Period

1409.33

Payment This Period

0.00

Outstanding Balance at Close of This Period

1409.33

1) **SUBTOTALS** This Period This Page (optional).....

12136.07

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 136 / 224

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Florida**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Crystal Beach DevelopmentNature of Debt (Purpose):  
travel

Mailing Address PO Box 1735

City State ZIP Code  
Destin FL 32540-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99306

Amount Incurred This Period

1305.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1305.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Luntz, Maslansky Strategic ServicesNature of Debt (Purpose):  
polling

Mailing Address 120 S Payne Street

City State ZIP Code  
Alexandria VA 22314-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99303

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Kennedy Communications, LLCNature of Debt (Purpose):  
telephone equipment

Mailing Address 426 SW Commerce Drive, S145

City State ZIP Code  
Lake City FL 32056-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99288

Amount Incurred This Period

5780.14

Payment This Period

0.00

Outstanding Balance at Close of This Period

5780.14

**1) SUBTOTALS** This Period This Page (optional).....

9585.14

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 137 / 224

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Florida**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Convergence Consulting Group, Inc.Nature of Debt (Purpose):  
travel & meals

Mailing Address P O Box 260241

City State ZIP Code  
Tampa FL 33685-0241

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99297

Amount Incurred This Period

9427.34

Payment This Period

0.00

Outstanding Balance at Close of This Period

9427.34

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Convergence Consulting Group, Inc.Nature of Debt (Purpose):  
data warehousing

Mailing Address P O Box 260241

City State ZIP Code  
Tampa FL 33685-0241

Outstanding Balance Beginning This Period

74640.00

Transaction ID: LS71017.E98281

Amount Incurred This Period

0.00

Payment This Period

74640.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Rosen Shingle Creek Golf ClubNature of Debt (Purpose):  
travel

Mailing Address 9939 Universal Blvd

City State ZIP Code  
Orlando FL 32819-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99309

Amount Incurred This Period

741634.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

741634.50

**1) SUBTOTALS** This Period This Page (optional).....

751061.84

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 138 / 224

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Florida**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Baer AirNature of Debt (Purpose):  
travel

Mailing Address 900 Airport Boulevard, Ste. 2

City State ZIP Code  
Merritt Island FL 32952-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99289

Amount Incurred This Period

25174.97

Payment This Period

0.00

Outstanding Balance at Close of This Period

25174.97

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Baer AirNature of Debt (Purpose):  
travel

Mailing Address 900 Airport Boulevard, Ste. 2

City State ZIP Code  
Merritt Island FL 32952-

Outstanding Balance Beginning This Period

38179.27

Transaction ID: LS71017.E98284

Amount Incurred This Period

0.00

Payment This Period

38179.27

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
J. M. Williams & Associates, LLCNature of Debt (Purpose):  
travel

Mailing Address 522 East Park Avenue, Suite 201

City State ZIP Code  
Tallahassee FL 32301-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99299

Amount Incurred This Period

1476.23

Payment This Period

0.00

Outstanding Balance at Close of This Period

1476.23

1) **SUBTOTALS** This Period This Page (optional).....

26651.20

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 139 / 224

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Florida**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
SCM Associates, Inc.Nature of Debt (Purpose):  
telemarketing

Mailing Address P O Box 254

City State ZIP Code  
Dublin NH 03444-0254

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99291

Amount Incurred This Period

18613.04

Payment This Period

0.00

Outstanding Balance at Close of This Period

18613.04

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Newman PrintingNature of Debt (Purpose):  
printing

Mailing Address 1215 Antioch Pike

City State ZIP Code  
Nashville TN 37211-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99292

Amount Incurred This Period

3071.87

Payment This Period

0.00

Outstanding Balance at Close of This Period

3071.87

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Green Wolf Group, LLCNature of Debt (Purpose):  
communications travel

Mailing Address 5903 S Elkins Avenue

City State ZIP Code  
Tampa FL 33611-

Outstanding Balance Beginning This Period

1252.07

Transaction ID: LS71017.E98270

Amount Incurred This Period

0.00

Payment This Period

1252.07

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

21684.91

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 140 / 224

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Florida**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Active Core TechnologiesNature of Debt (Purpose):  
email serviceMailing Address 385 West Mall, Unit #214  
Toronto Ontario M9C 1E7

City State ZIP Code

Outstanding Balance Beginning This Period

910.00

Transaction ID: LS71017.E98325

Amount Incurred This Period

0.00

Payment This Period

910.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Amy HairNature of Debt (Purpose):  
interpreting services

Mailing Address 6589 Paul Mar Drive

City State ZIP Code  
Lantana FL 33462-3937

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99308

Amount Incurred This Period

500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Pennsylvania Avenue StrategiesNature of Debt (Purpose):  
travel

Mailing Address 900 19th Street NW, 8th Floor

City State ZIP Code  
Washington DC 20006-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99310

Amount Incurred This Period

1343.87

Payment This Period

0.00

Outstanding Balance at Close of This Period

1343.87

**1) SUBTOTALS** This Period This Page (optional).....

1843.87

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 141 / 224

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Florida**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Luis FortunoNature of Debt (Purpose):  
travel

Mailing Address 126 Cannon House Office Building

City State ZIP Code  
Washington DC 20515-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99294

Amount Incurred This Period

1352.09

Payment This Period

0.00

Outstanding Balance at Close of This Period

1352.09

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Manuel BenitezNature of Debt (Purpose):  
outreach consulting

Mailing Address 603 North Alfred Street

City State ZIP Code  
Alexandria VA 22314-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99295

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Write Ideas Communications, Inc.Nature of Debt (Purpose):  
photography

Mailing Address 1740 NE 1st Street

City State ZIP Code  
Fort Lauderdale FL 33301-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99312

Amount Incurred This Period

1528.66

Payment This Period

0.00

Outstanding Balance at Close of This Period

1528.66

**1) SUBTOTALS** This Period This Page (optional).....

3880.75

**2) TOTALS** This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 142 / 224

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Florida**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
McGregor & AssociatesNature of Debt (Purpose):  
security

Mailing Address 4119 Louvinia Drive

City State ZIP Code  
Tallahassee FL 32311-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99315

Amount Incurred This Period

10057.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

10057.50

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Hospitality & Event Staff, Inc.Nature of Debt (Purpose):  
temporary staffing services

Mailing Address 4303 Vineland Road, F-16

City State ZIP Code  
Orlando FL 32811-

Outstanding Balance Beginning This Period

0.00

Transaction ID: LS71115.E99307

Amount Incurred This Period

8908.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8908.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

18965.50

2) **TOTALS** This Period (last page this line number only)..... ▶

922622.33

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

922622.33

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

- ☒ Presidential-Only Election Year (28% Federal)
- ☐ Presidential and Senate Election Year (36% Federal)
- ☐ Senate-Only Election Year (21% Federal)
- ☐ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %Nonfederal.....  %

This ratio applies to (check all that apply):

 Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

**SCHEDULE H2 (FEC Form 3X)****ALLOCATION RATIOS**

PAGE 44 / 224

NAME OF COMMITTEE (In Full)

**Republican Party of Florida****RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

<b>ACTIVITY OR EVENT IDENTIFIER</b> <b>MD-08</b> <hr/> <b>ACTIVITY IS:</b> <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support <b>CHECK IF THE RATIO IS:</b> <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	<b>FEDERAL %</b> <div>8.00%</div>	<b>NONFEDERAL %</b> <div>92.00%</div> <b>Transaction ID:</b> H2170116.J85
<b>ACTIVITY OR EVENT IDENTIFIER</b> <b>MD-08 INKIND TRANSFER</b> <hr/> <b>ACTIVITY IS:</b> <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support <b>CHECK IF THE RATIO IS:</b> <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	<b>FEDERAL %</b> <div>100.00%</div>	<b>NONFEDERAL %</b> <div>.0000%</div> <b>Transaction ID:</b> H2270623.J90
<b>ACTIVITY OR EVENT IDENTIFIER</b> <b>DM-08</b> <hr/> <b>ACTIVITY IS:</b> <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support <b>CHECK IF THE RATIO IS:</b> <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	<b>FEDERAL %</b> <div>98.00%</div>	<b>NONFEDERAL %</b> <div>2.00%</div> <b>Transaction ID:</b> H2370116.J86
<b>ACTIVITY OR EVENT IDENTIFIER</b> <b>TM-08</b> <hr/> <b>ACTIVITY IS:</b> <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support <b>CHECK IF THE RATIO IS:</b> <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	<b>FEDERAL %</b> <div>99.00%</div>	<b>NONFEDERAL %</b> <div>1.00%</div> <b>Transaction ID:</b> H2470116.J87



**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 145 / 224  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

NAME OF ACCOUNT

Non-federal acct-A-  
dmin inkind

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 0 / 2 0 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

44500.00

**BREAKDOWN OF TRANSFER RECEIVED**

i) **Total Administrative** .....

44500.00

Transaction ID: H371108.C1412903

ii) **Generic Voter Drive** .....

Transaction ID:

iii) **Exempt Activities** .....

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

**TOTAL** This Period (Administrative) .....

**TOTAL** This Period (Generic Voter Drive) .....

**TOTAL** This Period (Exempt Activities) .....

**TOTAL** This Period (Direct Fundraising) .....

**TOTAL** This Period (Direct Candidate Support) .....

**TOTAL** This Period (Public Communications Referring Only to Party) .....

**TOTAL** This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 146 / 224

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

NAME OF ACCOUNT

Non-federal acct-A-  
dmin inkind

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	0	7

TOTAL AMOUNT TRANSFERRED

1690.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1690.00

Transaction ID: H371108.C1412902

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 147 / 224

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

NAME OF ACCOUNT

Non-federal acct-A-  
dmin inkind

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	5		2	0	0	7

TOTAL AMOUNT TRANSFERRED

3900.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

3900.00

Transaction ID: H371108.C1412900

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 148 / 224  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

NAME OF ACCOUNT  
 Non-Federal Checki-  
 ng PO Box 311

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

448609.89

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

351683.83

Transaction ID: H371108.C1411294

ii) Generic Voter Drive .....

33336.74

Transaction ID: H371108.C1411298

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) MD-08

61653.86

Transaction ID: H371108.C1411295

b) DM-08

1416.19

Transaction ID: H371108.C1411296

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 149 / 224  
FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
Republican Party of Florida

NAME OF ACCOUNT  
Non-Federal Checki-  
ng PO Box 311

DATE OF RECEIPT

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

continued

**BREAKDOWN OF TRANSFER RECEIVED**

i) **Total Administrative** .....

Transaction ID:

ii) **Generic Voter Drive** .....

Transaction ID:

iii) **Exempt Activities** .....

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a) TM-08

519.27

Transaction ID: H371108.C1411299

b) \_\_\_\_\_

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

63589.32

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a) \_\_\_\_\_

Transaction ID:

b) \_\_\_\_\_

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

**TOTAL** This Period (Administrative) .....

**TOTAL** This Period (Generic Voter Drive) .....

**TOTAL** This Period (Exempt Activities) .....

**TOTAL** This Period (Direct Fundraising) .....

**TOTAL** This Period (Direct Candidate Support) .....

**TOTAL** This Period (Public Communications Referring Only to Party) .....

**TOTAL** This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 150 / 224  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

NAME OF ACCOUNT  
 Non-federal acct-A-  
 dmin inkind

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 0 / 1 9 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

22000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

22000.00

Transaction ID: H371108.C1412901

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 151 / 224

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

NAME OF ACCOUNT  
Non-federal account

DATE OF RECEIPT

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 0 7

TOTAL AMOUNT TRANSFERRED

794.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

0.00

Transaction ID: HB71015.C1409572

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) MD-08 INKIND

794.00

Transaction ID: H371015.C1409572

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

794.00

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

423773.83

TOTAL This Period (Generic Voter Drive) .....

33336.74

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

64383.32

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

521493.89

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 152 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Marina Arms

Mailing Address

1249 Winifred Drive

City	State	Zip Code
Tallahassee	FL	32308-

Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4047740.37

Date 

M	M
1	0

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471016.E98249

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

86.80

223.20

310.00

**B. Full Name (Last, First, Middle Initial)**  
Deborah A. Bishop

Mailing Address

2992 Corrib Drive

City	State	Zip Code
Tallahassee	FL	32309-

Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4046430.37

Date 

M	M
1	0

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471016.E98250

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

606.67

1560.00

2166.67

**C. Full Name (Last, First, Middle Initial)**  
Richard Franklin

Mailing Address

59 Otter Creek Road

City	State	Zip Code
Sopchoppy	FL	32358-

Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4038117.27

Date 

M	M
1	0

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471016.E98251

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

332.50

855.00

1187.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1025.97

2638.20

3664.17

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 153 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Vivian A Chalus

Mailing Address

8061 Meridale Drive

City	State	Zip Code
Tallahassee	FL	32305-

Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4047430.37

Date 

M	M
1	0

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471016.E98252

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

280.00

720.00

1000.00

**B. Full Name (Last, First, Middle Initial)**  
Kay M. Linton

Mailing Address

127 Tom White Lane

City	State	Zip Code
Crawfordville	FL	32327-

Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4040388.52

Date 

M	M
1	0

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471016.E98253

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

635.95

1635.30

2271.25

**C. Full Name (Last, First, Middle Initial)**  
Richard Swartz

Mailing Address

8900 Winged Foot Drive

City	State	Zip Code
Tallahassee	FL	32312-

Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4043790.19

Date 

M	M
1	0

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471016.E98254

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

952.47

2449.20

3401.67

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1868.42

4804.50

6672.92

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 154 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 ADP, Inc.

Mailing Address

P O Box 9001006

City	State	Zip Code
Louisville	KY	40290-

Purpose of Disbursement:  
 payroll deductions & taxes

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4044263.70

Date 

M	M
1	0

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471016.E98255

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

132.58

340.93

473.51

**B. Full Name (Last, First, Middle Initial)**  
 Yuma Solutions, Inc.

Mailing Address

P O Box 152075

City	State	Zip Code
Tampa	FL	33684-

Purpose of Disbursement:  
 hardware/software

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3864133.39

Date 

M	M
1	0

 / 

D	D
0	2

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98259

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4615.03

11867.23

16482.26

**C. Full Name (Last, First, Middle Initial)**  
 Yuma Solutions, Inc.

Mailing Address

P O Box 152075

City	State	Zip Code
Tampa	FL	33684-

Purpose of Disbursement:  
 hardware/software

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3872971.92

Date 

M	M
1	0

 / 

D	D
0	2

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98260

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2474.79

6363.74

8838.53

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7222.40

18571.90

25794.30

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 155 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Richard Swartz

Mailing Address

8900 Winged Foot Drive

City	State	Zip Code
------	-------	----------

Tallahassee	FL	32312-
-------------	----	--------

Purpose of Disbursement:  
 travel

Category/  
 Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3873230.06

Date 

M	M
1	0

 / 

D	D
0	2

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98261

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.28

185.86

258.14

**B. Full Name (Last, First, Middle Initial)**  
 Jeffrey Phillips

Mailing Address

1037 High Meadow Drive

City	State	Zip Code
------	-------	----------

Tallahassee	FL	32311-
-------------	----	--------

Purpose of Disbursement:  
 Reimb:see below-office supplies

Category/  
 Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3873243.58

Date 

M	M
1	0

 / 

D	D
0	2

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98262

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.79

9.73

13.52

**C. Full Name (Last, First, Middle Initial)**  
 Best Buy

Mailing Address

1416 Apalachee Pkwy.

City	State	Zip Code
------	-------	----------

Tallahassee	FL	32301-
-------------	----	--------

Purpose of Disbursement:  
 office supplies

Category/  
 Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

**(MEMO ITEM)** office supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10.74

Date 

M	M
1	0

 / 

D	D
0	2

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98478

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.01

7.73

10.74

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

76.07

195.59

271.66

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 156 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Wal-Mart

Mailing Address

2255 Highway 71

City State Zip Code

Marianna FL 32448-

Purpose of Disbursement:  
office suppliesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1**(MEMO ITEM)** office supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2.78

Date 

M	M
1	0

 / 

D	D
0	2

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98479

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.78

2.00

2.78

**B. Full Name (Last, First, Middle Initial)**  
Marina Arms

Mailing Address

1249 Winifred Drive

City State Zip Code

Tallahassee FL 32308-

Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3873527.56

Date 

M	M
1	0

 / 

D	D
0	2

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98264

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

79.51

204.47

283.98

**C. Full Name (Last, First, Middle Initial)**  
Majority Strategies

Mailing Address

135 Professional Drive, S 104

City State Zip Code

Ponte Vedra Beach FL 32082-

Purpose of Disbursement:  
invitationsCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3876352.56

Date 

M	M
1	0

 / 

D	D
0	4

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98266

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

791.00

2034.00

2825.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

870.51

2238.47

3108.98

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 157 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Taproot Creative

Mailing Address

P O Box 10556

City State Zip Code

Tallahassee FL 32302-

Purpose of Disbursement:  
it consulting

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3888352.56

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	7

Transaction ID: H471017.E98267

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3360.00

8640.00

12000.00

**B. Full Name (Last, First, Middle Initial)**  
Green Wolf Group, LLC

Mailing Address

5903 S Elkins Avenue

City State Zip Code

Tampa FL 33611-

Purpose of Disbursement:  
communications consulting

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3898148.77

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	7

Transaction ID: H471017.E98269

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2691.99

6922.27

9614.26

**C. Full Name (Last, First, Middle Initial)**  
Green Wolf Group, LLC

Mailing Address

5903 S Elkins Avenue

City State Zip Code

Tampa FL 33611-

Purpose of Disbursement:  
communications travel

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3899400.84

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	7

Transaction ID: H471017.E98270

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

350.58

901.49

1252.07

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6402.57

16463.76

22866.33

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 158 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**

Gregory J Ungru

## Mailing Address

3869 Overlook Drive

City State Zip Code

Tallahassee FL 32311-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3888534.51

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: H471017.E98272

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

50.95

131.00

181.95

**B. Full Name (Last, First, Middle Initial)**

American Express

## Mailing Address

P.O. Box 650448

City State Zip Code

Dallas TX 75265-0448

Purpose of Disbursement:  
Credit Card:see below-travel & suppCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3904650.33

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: H471017.E98274

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

805.73

2071.89

2877.62

**C. Full Name (Last, First, Middle Initial)**

The Rosen Centre Hotel

## Mailing Address

9840 International Drive

City State Zip Code

Orlando FL 32819-3169

Purpose of Disbursement:  
mealCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1**[MEMO ITEM]** meal

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

11.34

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: H471108.E98470

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

3.18

8.16

11.34

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

856.68

2202.89

3059.57

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 159 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Po Boys

Mailing Address

224 E. College Avenue

City State Zip Code

Tallahassee FL 32301-

Purpose of Disbursement:  
 meal

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

[MEMO ITEM] meal

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

67.00

Date M M / D D / Y Y Y Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98447

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

18.76

48.24

67.00

**B. Full Name (Last, First, Middle Initial)**  
 Gordos

Mailing Address

1907 Pensacola Street

City State Zip Code

Tallahassee FL 32302-

Purpose of Disbursement:  
 meal

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

[MEMO ITEM] meal

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

53.00

Date M M / D D / Y Y Y Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98448

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

14.84

38.16

53.00

**C. Full Name (Last, First, Middle Initial)**  
 Doubletree Hotel

Mailing Address

101 S. Adams Street

City State Zip Code

Tallahassee FL 32301-

Purpose of Disbursement:  
 travel

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

[MEMO ITEM] travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

160.99

Date M M / D D / Y Y Y Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98453

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

45.08

115.91

160.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 160 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Circle K

Mailing Address

3510 Thomasville Road

 City State Zip Code  
Tallahassee FL 32308-
Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1**[MEMO ITEM]**travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

37.07

Date  M  M /  D  D /  Y  Y  Y  Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98452

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.38

26.69

37.07

**B. Full Name (Last, First, Middle Initial)**  
Hess

Mailing Address

1501 State Road 434

 City State Zip Code  
Winter Springs FL 32708-
Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1**[MEMO ITEM]**travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9.64

Date  M  M /  D  D /  Y  Y  Y  Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98460

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.70

6.94

9.64

**C. Full Name (Last, First, Middle Initial)**  
Hess

Mailing Address

1501 State Road 434

 City State Zip Code  
Winter Springs FL 32708-
Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1**[MEMO ITEM]**travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

61.01

Date  M  M /  D  D /  Y  Y  Y  Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98461

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17.08

43.93

61.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 161 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Circle K

Mailing Address

14990 W Colonial Drive

City	State	Zip Code
------	-------	----------

Winter Garden	FL	34787-
---------------	----	--------

Purpose of Disbursement:  
 travel

Category/  
 Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

[MEMO ITEM]travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

47.00

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98457

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
---------------	---	------------------	---	--------------

13.16

33.84

47.00

**B. Full Name (Last, First, Middle Initial)**  
 7-Eleven

Mailing Address

15001 W. Colonial Drive

City	State	Zip Code
------	-------	----------

Winter Garden	FL	34787-
---------------	----	--------

Purpose of Disbursement:  
 travel

Category/  
 Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

[MEMO ITEM]travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

43.03

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98462

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
---------------	---	------------------	---	--------------

12.05

30.98

43.03

**C. Full Name (Last, First, Middle Initial)**  
 Courtside Grille

Mailing Address

110 Fountaine Pkwy. N

City	State	Zip Code
------	-------	----------

Saint Petersburg	FL	33716-
------------------	----	--------

Purpose of Disbursement:  
 meal

Category/  
 Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

[MEMO ITEM]meal

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

50.00

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98466

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
---------------	---	------------------	---	--------------

14.00

36.00

50.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
---------------	---	------------------	---	--------------

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
---------------	------------------	--------------

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 162 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 BP

Mailing Address

4602 N. Lois Avenue

City	State	Zip Code
Tampa	FL	33614-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1**[MEMO ITEM]**travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6.28

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98464

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.76

4.52

6.28

**B. Full Name (Last, First, Middle Initial)**  
 BP

Mailing Address

4602 N. Lois Avenue

City	State	Zip Code
Tampa	FL	33614-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1**[MEMO ITEM]**travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

50.05

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98465

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

14.01

36.04

50.05

**C. Full Name (Last, First, Middle Initial)**  
 Luiginos

Mailing Address

120 International Parkway

City	State	Zip Code
Lake Mary	FL	32746-

Purpose of Disbursement:  
mealCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1**[MEMO ITEM]**meal

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

61.00

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98469

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17.08

43.92

61.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 163 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 7-Eleven

Mailing Address

5703 S. Semoran Blvd.

City	State	Zip Code
------	-------	----------

Orlando	FL	32822-
---------	----	--------

Purpose of Disbursement:  
 travel

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

**[MEMO ITEM]**travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

43.03

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98458

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

12.05

30.98

43.03

**B. Full Name (Last, First, Middle Initial)**  
 Citgo

Mailing Address

14580 W. Colonial Drive

City	State	Zip Code
------	-------	----------

Winter Garden	FL	34787-
---------------	----	--------

Purpose of Disbursement:  
 travel

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

**[MEMO ITEM]**travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

53.03

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98451

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

14.85

38.18

53.03

**C. Full Name (Last, First, Middle Initial)**  
 Citgo

Mailing Address

14580 W. Colonial Drive

City	State	Zip Code
------	-------	----------

Winter Garden	FL	34787-
---------------	----	--------

Purpose of Disbursement:  
 travel

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

**[MEMO ITEM]**travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

23.01

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98455

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.44

16.57

23.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 164 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Hess

Mailing Address

13707 West Colonial Drive

City	State	Zip Code
------	-------	----------

Winter Garden	FL	34787-
---------------	----	--------

Purpose of Disbursement:  
 travel

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

**[MEMO ITEM]** travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

32.00

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98456

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.96

23.04

32.00

**B. Full Name (Last, First, Middle Initial)**  
 Hess

Mailing Address

13707 West Colonial Drive

City	State	Zip Code
------	-------	----------

Winter Garden	FL	34787-
---------------	----	--------

Purpose of Disbursement:  
 travel

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

**[MEMO ITEM]** travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

48.48

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98449

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

13.57

34.91

48.48

**C. Full Name (Last, First, Middle Initial)**  
 Sundance Lodging

Mailing Address

RR 3 Box A1

City	State	Zip Code
------	-------	----------

Provo	UT	84604-
-------	----	--------

Purpose of Disbursement:  
 travel

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

**[MEMO ITEM]** travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

25.00

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98441

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.00

18.00

25.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 165 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
HMS Host

Mailing Address

Terminal One, 3rd FL

City State Zip Code  
Salt Lake City UT 84122-

Purpose of Disbursement:  
travel

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 1

**[MEMO ITEM]**travel

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

27.10

Date M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98440

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.59

19.51

27.10

**B. Full Name (Last, First, Middle Initial)**  
After Hours Formal Wear

Mailing Address

14748 W. Colonial Drive

City State Zip Code  
Winter Garden FL 34787-

Purpose of Disbursement:  
formal wear rental

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 1

**[MEMO ITEM]**formal wear rental

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

159.73

Date M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98442

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

44.72

115.01

159.73

**C. Full Name (Last, First, Middle Initial)**  
Office Depot

Mailing Address

2559 E. Highway 50

City State Zip Code  
Clermont FL 34711-

Purpose of Disbursement:  
office supplies

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 1

**[MEMO ITEM]**office supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

243.43

Date M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98443

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

68.16

175.27

243.43

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 166 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Office Depot

Mailing Address

2559 E. Highway 50

City State Zip Code

Clermont FL 34711-

Purpose of Disbursement:  
 office supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

**[MEMO ITEM]** office supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

274.21

Date  M  M /  D  D /  Y  Y  Y  Y

10 / 09 / 2007

Transaction ID: H471108.E98445

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

76.78

197.43

274.21

**B. Full Name (Last, First, Middle Initial)**  
 Staples

Mailing Address

1950 W State Road 426

City State Zip Code

Oviedo FL 32765-

Purpose of Disbursement:  
 office supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

**[MEMO ITEM]** office supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

195.15

Date  M  M /  D  D /  Y  Y  Y  Y

10 / 09 / 2007

Transaction ID: H471108.E98444

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

54.64

140.51

195.15

**C. Full Name (Last, First, Middle Initial)**  
 Buffalo Wild Wings

Mailing Address

1115 Vidina Place, Ste. 101

City State Zip Code

Oviedo FL 32765-8527

Purpose of Disbursement:  
 meal

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

**[MEMO ITEM]** meal

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

40.00

Date  M  M /  D  D /  Y  Y  Y  Y

10 / 09 / 2007

Transaction ID: H471108.E98446

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.20

28.80

40.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 167 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Citgo

Mailing Address

5951 Handy Way

City State Zip Code

Oakland FL 34760-

Purpose of Disbursement:  
travelCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

27.07

Activity or Event Identifier:  
ADMINISTRATION B 1**[MEMO ITEM]**travelDate M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98450

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.58

19.49

27.07

**B. Full Name (Last, First, Middle Initial)**  
 BP

Mailing Address

1650 E. Silver Star Road

City State Zip Code

Ocoee FL 34761-

Purpose of Disbursement:  
travelCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

69.00

Activity or Event Identifier:  
ADMINISTRATION B 1**[MEMO ITEM]**travelDate M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98454

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

19.32

49.68

69.00

**C. Full Name (Last, First, Middle Initial)**  
 Shell

Mailing Address

1417 Swank Avenue

City State Zip Code

Sebring FL 33870-

Purpose of Disbursement:  
travelCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

62.01

Activity or Event Identifier:  
ADMINISTRATION B 1**[MEMO ITEM]**travelDate M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98459

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

17.36

44.65

62.01

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 168 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**

Kangaroo Express

## Mailing Address

1920 S French Avenue

City State Zip Code

Sanford FL 32771-

Purpose of Disbursement:  
travelCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

80.00

## Activity or Event Identifier:

ADMINISTRATION B 1

**[MEMO ITEM]**travel

Date M M / D D / Y Y Y Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98463

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

22.40

57.60

80.00

**B. Full Name (Last, First, Middle Initial)**

Michaels

## Mailing Address

3801 S. Dale Mabry Hwy.

City State Zip Code

Tampa FL 33611-

Purpose of Disbursement:  
office suppliesCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

620.96

## Activity or Event Identifier:

ADMINISTRATION B 1

**[MEMO ITEM]**office supplies

Date M M / D D / Y Y Y Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98467

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

173.87

447.09

620.96

**C. Full Name (Last, First, Middle Initial)**

Bubba Gump Shrimp Co.

## Mailing Address

6000 Universal Blvd., #735

City State Zip Code

Orlando FL 32819-

Purpose of Disbursement:  
mealsCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

164.00

## Activity or Event Identifier:

ADMINISTRATION B 1

**[MEMO ITEM]**meals

Date M M / D D / Y Y Y Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98468

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

45.92

118.08

164.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 169 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Santa Maria Restaurant

Mailing Address

239 Coquina Avenue

City State Zip Code

St. Augustine FL 32080-

Purpose of Disbursement:  
 meal

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

**[MEMO ITEM]** meal

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

33.00

Date  M  M /  D  D /  Y  Y  Y  Y

10 / 09 / 2007

Transaction ID: H471108.E98471

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.24

23.76

33.00

**B. Full Name (Last, First, Middle Initial)**  
 American Express

Mailing Address

P.O. Box 650448

City State Zip Code

Dallas TX 75265-0448

Purpose of Disbursement:  
 Credit Card:see below-travel & supp

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3906182.87

Date  M  M /  D  D /  Y  Y  Y  Y

10 / 09 / 2007

Transaction ID: H471017.E98276

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

429.11

1103.43

1532.54

**C. Full Name (Last, First, Middle Initial)**  
 1-800-Flowers

Mailing Address

1600 Stewart Avenue

City State Zip Code

Westbury NY 11590-

Purpose of Disbursement:  
 flowers

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

**[MEMO ITEM]** flowers

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

56.69

Date  M  M /  D  D /  Y  Y  Y  Y

10 / 09 / 2007

Transaction ID: H471108.E98407

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

15.87

40.82

56.69

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

429.11

1103.43

1532.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 170 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**

American Spirit Flags, Inc.

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

360.00

Mailing Address

838 Dodecanese Blvd.

City

State

Zip Code

Tarpon Springs

FL

34689-

Purpose of Disbursement:  
suppliesCategory/  
Type

Activity or Event Identifier:

ADMINISTRATION B 1

**[MEMO ITEM]**supplies

Date

M M

/

D D

/

Y Y

Y Y

1 0

0 9

2 0

0 7

Transaction ID: H471108.E98408

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

100.80

259.20

360.00

**B. Full Name (Last, First, Middle Initial)**

American Spirit Flags, Inc.

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

192.60

Mailing Address

838 Dodecanese Blvd.

City

State

Zip Code

Tarpon Springs

FL

34689-

Purpose of Disbursement:  
suppliesCategory/  
Type

Activity or Event Identifier:

ADMINISTRATION B 1

**[MEMO ITEM]**supplies

Date

M M

/

D D

/

Y Y

Y Y

1 0

0 9

2 0

0 7

Transaction ID: H471108.E98409

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

53.93

138.67

192.60

**C. Full Name (Last, First, Middle Initial)**

Hyatt Regency

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

261.36

Mailing Address

225 Coastline Drive E

City

State

Zip Code

Jacksonville

FL

32202-

Purpose of Disbursement:  
travelCategory/  
Type

Activity or Event Identifier:

ADMINISTRATION B 1

**[MEMO ITEM]**travel

Date

M M

/

D D

/

Y Y

Y Y

1 0

0 9

2 0

0 7

Transaction ID: H471108.E98413

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

73.18

188.18

261.36

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 171 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**

Hyatt Regency

Mailing Address

225 Coastline Drive E

City State Zip Code

Jacksonville FL 32202-

Purpose of Disbursement:  
travelCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

284.18

Activity or Event Identifier:

ADMINISTRATION B 1

**[MEMO ITEM]**travel

Date M M / D D / Y Y Y Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98415

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

79.57

204.61

284.18

**B. Full Name (Last, First, Middle Initial)**

Hilton Ocala

Mailing Address

3600 SW 36th Avenue

City State Zip Code

Ocala FL 34474-

Purpose of Disbursement:  
travelCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

77.15

Activity or Event Identifier:

ADMINISTRATION B 1

**[MEMO ITEM]**travel

Date M M / D D / Y Y Y Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98414

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21.60

55.55

77.15

**C. Full Name (Last, First, Middle Initial)**

Spice Steak House

Mailing Address

326 S Park Avenue

City State Zip Code

Winter Park FL 32789-

Purpose of Disbursement:  
mealsCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

163.59

Activity or Event Identifier:

ADMINISTRATION B 1

**[MEMO ITEM]**meals

Date M M / D D / Y Y Y Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98411

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

45.81

117.78

163.59

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 172 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Trophy Center

Mailing Address

339 Park Street

City State Zip Code

Jacksonville FL 32204-

Purpose of Disbursement:  
suppliesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1**[MEMO ITEM]**supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

79.80

Date M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98410

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

22.34

57.46

79.80

**B. Full Name (Last, First, Middle Initial)**  
 Bennigans

Mailing Address

3155 E Silver Spring Blvd.

City State Zip Code

Ocala FL 34470-

Purpose of Disbursement:  
mealCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1**[MEMO ITEM]**meal

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

57.17

Date M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98412

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

16.01

41.16

57.17

**C. Full Name (Last, First, Middle Initial)**  
 Staples Business Advantage

Mailing Address

Dept ATL P O Box 530621

City State Zip Code

Atlanta GA 30353-

Purpose of Disbursement:  
office suppliesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3919159.68

Date M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471017.E98277

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

133.51

343.30

476.81

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

133.51

343.30

476.81

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 173 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Avis Rent-A-Car

Mailing Address

7876 Collections Center Drive

City	State	Zip Code
Chicago	IL	60693-

Purpose of Disbursement:  
 car rental

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3901772.71

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98278

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

664.12

1707.75

2371.87

**B. Full Name (Last, First, Middle Initial)**  
 Convergence Consulting Group, Inc.

Mailing Address

P O Box 260241

City	State	Zip Code
Tampa	FL	33685-0241

Purpose of Disbursement:  
 data warehousing

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3961494.68

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98281

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11853.80

30481.20

42335.00

**C. Full Name (Last, First, Middle Initial)**  
 Convergence Consulting Group, Inc.

Mailing Address

P O Box 260241

City	State	Zip Code
Tampa	FL	33685-0241

Purpose of Disbursement:  
 data warehousing

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3993799.68

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98282

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9045.40

23259.60

32305.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21563.32

55448.55

77011.87

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 174 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Cathleen McCarroll

Mailing Address

2403 Hartsfield Road, #103

City	State	Zip Code
------	-------	----------

Tallahassee	FL	32303-
-------------	----	--------

Purpose of Disbursement:  
 travel

Category/  
 Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3993934.27

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98283

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

37.69

96.90

134.59

**B. Full Name (Last, First, Middle Initial)**  
 Baer Air

Mailing Address

900 Airport Boulevard, Ste. 2

City	State	Zip Code
------	-------	----------

Merritt Island	FL	32952-
----------------	----	--------

Purpose of Disbursement:  
 travel

Category/  
 Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3996611.84

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98284

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

749.72

1927.85

2677.57

**C. Full Name (Last, First, Middle Initial)**  
 Baer Air

Mailing Address

900 Airport Boulevard, Ste. 2

City	State	Zip Code
------	-------	----------

Merritt Island	FL	32952-
----------------	----	--------

Purpose of Disbursement:  
 travel

Category/  
 Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4010057.89

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98285

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3764.89

9681.16

13446.05

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4552.30

11705.91

16258.21

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 175 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**

Baer Air

## Mailing Address

900 Airport Boulevard, Ste. 2

City State Zip Code

Merritt Island FL 32952-

Purpose of Disbursement:  
travelCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4011349.52

Activity or Event Identifier:  
ADMINISTRATION B 1Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98287

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

361.66

929.97

1291.63

**B. Full Name (Last, First, Middle Initial)**

Ausley &amp; McMullen

## Mailing Address

PO Box 391

City State Zip Code

Tallahassee FL 32302-

Purpose of Disbursement:  
legal feesCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3911182.87

Activity or Event Identifier:  
ADMINISTRATION B 1Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98288

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1400.00

3600.00

5000.00

**C. Full Name (Last, First, Middle Initial)**

Ausley &amp; McMullen

## Mailing Address

PO Box 391

City State Zip Code

Tallahassee FL 32302-

Purpose of Disbursement:  
legal feesCategory/  
Type

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3918682.87

Activity or Event Identifier:  
ADMINISTRATION B 1Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98289

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2100.00

5400.00

7500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3861.66

9929.97

13791.63

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 176 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**

Armando Vilaboy

## Mailing Address

53 SW 98th Avenue

City State Zip Code

Miami FL 33174-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4011549.17

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	7

Transaction ID: H471017.E98290

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

55.90

143.75

199.65

**B. Full Name (Last, First, Middle Initial)**

Comdata Corporation

## Mailing Address

P O Box 100647

City State Zip Code

Atlanta GA 30384-0647

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4013048.93

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	7

Transaction ID: H471017.E98291

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

419.93

1079.83

1499.76

**C. Full Name (Last, First, Middle Initial)**

Environ Services, Inc

## Mailing Address

P O Box 4061

City State Zip Code

Tallahassee FL 32315-4061

Purpose of Disbursement:  
office cleaning & suppliesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4014754.39

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	7

Transaction ID: H471017.E98293

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

477.53

1227.93

1705.46

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

953.36

2451.51

3404.87

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 177 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
City of Tallahassee

Mailing Address

600 N Monroe Street

City State Zip Code

Tallahassee FL 32301-

 Purpose of Disbursement:  
utilities

 Category/  
Type

 Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4020223.30

 Date 

M	M
1	0

 / 

D	D
1	1

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98297

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1096.11

2818.57

3914.68

**B. Full Name (Last, First, Middle Initial)**  
Elevator Telephone Service

Mailing Address

P.O. Box 23

City State Zip Code

Marianna FL 32447-

 Purpose of Disbursement:  
elevator telephone service

 Category/  
Type

 Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4020542.26

 Date 

M	M
1	0

 / 

D	D
1	1

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98298

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

24.82

63.81

88.63

**C. Full Name (Last, First, Middle Initial)**  
Quality Water Supply, Inc.

Mailing Address

1491 Quality Way

City State Zip Code

Tallahassee FL 32303-

 Purpose of Disbursement:  
water supply

 Category/  
Type

 Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4014931.48

 Date 

M	M
1	0

 / 

D	D
1	1

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98299

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

49.59

127.50

177.09

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1170.52

3009.88

4180.40

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 178 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Sonitrol of Tallahassee, Inc.

Mailing Address

P O Box 1678

City	State	Zip Code
Tallahassee	FL	32302-1678

Purpose of Disbursement:  
key cardsCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4014952.98

Date 

M	M
1	0

 / 

D	D
1	1

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98300

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.02

15.48

21.50

**B. Full Name (Last, First, Middle Initial)**  
ADP, Inc.

Mailing Address

P O Box 9001006

City	State	Zip Code
Louisville	KY	40290-

Purpose of Disbursement:  
payroll serviceCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4021326.46

Date 

M	M
1	0

 / 

D	D
1	1

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98301

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

60.33

155.12

215.45

**C. Full Name (Last, First, Middle Initial)**  
Kintera Fundware

Mailing Address

P O Box 515041

City	State	Zip Code
Los Angeles	CA	90051-5041

Purpose of Disbursement:  
software updatesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4021111.01

Date 

M	M
1	0

 / 

D	D
1	1

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98302

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

159.25

409.50

568.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

225.60

580.10

805.70

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 179 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Xerox Corporation

Mailing Address

PO Box 660303

 City State Zip Code  
Dallas TX 75266-

 Purpose of Disbursement:  
equipment lease

 Category/  
Type

 Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4016308.62

 Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 1 1 / 2 0 0 7

Transaction ID: H471017.E98303

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

379.58

976.06

1355.64

**B. Full Name (Last, First, Middle Initial)**  
Kennedy Communications, LLC

Mailing Address

426 SW Commerce Drive, S145

 City State Zip Code  
Lake City FL 32056-

 Purpose of Disbursement:  
telephone equipment maintenance

 Category/  
Type

 Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4022024.52

 Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 1 1 / 2 0 0 7

Transaction ID: H471017.E98304

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

195.46

502.60

698.06

**C. Full Name (Last, First, Middle Initial)**  
US Lawns of Tallahassee, Inc.

Mailing Address

2901 Quail Rise Court

 City State Zip Code  
Tallahassee FL 32305-

 Purpose of Disbursement:  
lawn care

 Category/  
Type

 Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4022288.52

 Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 1 1 / 2 0 0 7

Transaction ID: H471017.E98305

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

73.92

190.08

264.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

648.96

1668.74

2317.70

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 180 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Comcast Cable

Mailing Address  
 PO Box 105184

City State Zip Code  
 Atlanta GA 30348-5184

Purpose of Disbursement:  
 cable service

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4020381.73

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 1 1 / 2 0 0 7

Transaction ID: H471017.E98306

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

44.36

114.07

158.43

**B. Full Name (Last, First, Middle Initial)**  
 Mowrey Elevator Co of Fla, Inc

Mailing Address  
 4518 Lafayette Street

City State Zip Code  
 Marianna FL 32446-

Purpose of Disbursement:  
 elevator maintenance

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4020453.63

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 1 1 / 2 0 0 7

Transaction ID: H471017.E98307

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

20.13

51.77

71.90

**C. Full Name (Last, First, Middle Initial)**  
 Baer Air

Mailing Address  
 900 Airport Boulevard, Ste. 2

City State Zip Code  
 Merritt Island FL 32952-

Purpose of Disbursement:  
 travel

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4035177.27

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 1 1 / 2 0 0 7

Transaction ID: H471017.E98308

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3608.85

9279.90

12888.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3673.34

9445.74

13119.08

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 181 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Accurint

Mailing Address

P O Box 7247-6157

City

State

Zip Code

Philadelphia

PA

19170-6157

Purpose of Disbursement:

background searches on new hires

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4035365.77

Date

M M / D D / Y Y Y Y

1 0 / 1 1 / 2 0 0 7

Transaction ID: H471017.E98309

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

52.78

135.72

188.50

**B. Full Name (Last, First, Middle Initial)**  
 At&t

Mailing Address

P O Box 277019

City

State

Zip Code

Atlanta

GA

30384-7019

Purpose of Disbursement:

internet

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4035954.77

Date

M M / D D / Y Y Y Y

1 0 / 1 1 / 2 0 0 7

Transaction ID: H471017.E98310

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

164.92

424.08

589.00

**C. Full Name (Last, First, Middle Initial)**  
 Scootaround, Inc.

Mailing Address

310-530 Kenaston Boulevard Winnipeg, Manitoba R3N-1ZA

City

State

Zip Code

Purpose of Disbursement:

scooters

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4036929.77

Date

M M / D D / Y Y Y Y

1 0 / 1 1 / 2 0 0 7

Transaction ID: H471017.E98312

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

273.00

702.00

975.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

490.70

1261.80

1752.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 182 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**

Core Message, Inc.

Mailing Address

203 N. Gadsden

City State Zip Code

Tallahassee FL 32301-

Purpose of Disbursement:  
public relations consultingCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4127265.37

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	7

Transaction ID: H471017.E98314

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7000.00

18000.00

25000.00

**B. Full Name (Last, First, Middle Initial)**

Kintera Fundware

Mailing Address

P O Box 515041

City State Zip Code

Los Angeles CA 90051-5041

Purpose of Disbursement:  
software updatesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4315227.62

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	7

Transaction ID: H471017.E98315

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

294.00

756.00

1050.00

**C. Full Name (Last, First, Middle Initial)**

Majority Strategies

Mailing Address

135 Professional Drive, S 104

City State Zip Code

Ponte Vedra Beach FL 32082-

Purpose of Disbursement:  
printingCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4102265.37

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	7

Transaction ID: H471017.E98316

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

15267.00

39258.00

54525.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

22561.00

58014.00

80575.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 183 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Erin J. Vansickle

Mailing Address

417 West 7th Avenue

City	State	Zip Code
Tallahassee	FL	32303-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4315288.35

Date 10 / 16 / 2007

Transaction ID: H471017.E98318

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.00		43.73		60.73

**B. Full Name (Last, First, Middle Initial)**  
Caroline Ferguson

Mailing Address

3120 Vause Drive

City	State	Zip Code
Tallahassee	FL	32303-

Purpose of Disbursement:  
photographyCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4315388.35

Date 10 / 16 / 2007

Transaction ID: H471017.E98319

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.00		72.00		100.00

**C. Full Name (Last, First, Middle Initial)**  
504 LLC

Mailing Address

1334 Rachel Lane

City	State	Zip Code
Tallahassee	FL	32308-

Purpose of Disbursement:  
rentCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4317188.35

Date 10 / 16 / 2007

Transaction ID: H471017.E98320

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
504.00		1296.00		1800.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
549.00		1411.73		1960.73

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 184 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
HIW-KC Orlando, LLC

Mailing Address

P O Box 934156

 City State Zip Code  
Atlanta GA 31193-

 Purpose of Disbursement:  
rent
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4319405.68

 Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 1 6 / 2 0 0 7

Transaction ID: H471017.E98321

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
620.85		1596.48		2217.33

**B. Full Name (Last, First, Middle Initial)**  
Jennifer McMillan

Mailing Address

928 B Carraway Street

 City State Zip Code  
Tallahassee FL 32308-

 Purpose of Disbursement:  
Reimb:see below-office supplies
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4319427.16

 Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 1 6 / 2 0 0 7

Transaction ID: H471017.E98322

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.01		15.47		21.48

**C. Full Name (Last, First, Middle Initial)**  
Best Buy

Mailing Address

1416 Apalachee Pkwy.

 City State Zip Code  
Tallahassee FL 32301-

 Purpose of Disbursement:  
office supplies
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 1
**[MEMO ITEM]** office supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

21.48

 Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 1 6 / 2 0 0 7

Transaction ID: H471113.E99181

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.01		15.47		21.48

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
626.86		1611.95		2238.81

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 185 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Jennifer McMillan

Mailing Address

928 B Carraway Street

City	State	Zip Code
Tallahassee	FL	32308-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4319481.37

Date 

M	M
1	0

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98323

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

15.18

39.03

54.21

**B. Full Name (Last, First, Middle Initial)**  
 HealthEquity, Inc.

Mailing Address

15 West Scenic Point Drive, S 400

City	State	Zip Code
Draper	UT	84020-

Purpose of Disbursement:  
health insuranceCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4320126.21

Date 

M	M
1	0

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98324

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

180.56

464.28

644.84

**C. Full Name (Last, First, Middle Initial)**  
 Active Core Technologies

Mailing Address

385 West Mall, Unit #214 Toronto Ontario M9C 1E7

City	State	Zip Code
------	-------	----------

Purpose of Disbursement:  
email serviceCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4321036.21

Date 

M	M
1	0

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98325

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

254.80

655.20

910.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

450.54

1158.51

1609.05

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 186 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Marina Arms

Mailing Address

1249 Winifred Drive

City	State	Zip Code
Tallahassee	FL	32308-

Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4370483.38

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98397

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.59

16.93

23.52

**B. Full Name (Last, First, Middle Initial)**  
 Marina Arms

Mailing Address

1249 Winifred Drive

City	State	Zip Code
Tallahassee	FL	32308-

Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4370835.88

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98398

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

98.70

253.80

352.50

**C. Full Name (Last, First, Middle Initial)**  
 Deborah A. Bishop

Mailing Address

2992 Corrib Drive

City	State	Zip Code
Tallahassee	FL	32309-

Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4365154.01

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98399

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

606.67

1560.00

2166.67

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

711.96

1830.73

2542.69

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 187 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Richard Franklin

Mailing Address

59 Otter Creek Road

 City State Zip Code  
Sopchoppy FL 32358-
Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4345503.62

Date  M  M /  D  D /  Y  Y  Y  Y  
1 0 / 3 0 / 2 0 0 7

Transaction ID: H471108.E98400

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

332.50

855.00

1187.50

**B. Full Name (Last, First, Middle Initial)**  
Vivian A Chalus

Mailing Address

8061 Meridale Drive

 City State Zip Code  
Tallahassee FL 32305-
Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4367772.28

Date  M  M /  D  D /  Y  Y  Y  Y  
1 0 / 3 0 / 2 0 0 7

Transaction ID: H471108.E98401

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

280.00

720.00

1000.00

**C. Full Name (Last, First, Middle Initial)**  
Kay M. Linton

Mailing Address

127 Tom White Lane

 City State Zip Code  
Crawfordville FL 32327-
Purpose of Disbursement:  
payrollCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4353629.12

Date  M  M /  D  D /  Y  Y  Y  Y  
1 0 / 3 0 / 2 0 0 7

Transaction ID: H471108.E98402

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

628.32

1615.68

2244.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1240.82

3190.68

4431.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 188 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Richard Swartz

Mailing Address

8900 Winged Foot Drive

City State Zip Code

Tallahassee FL 32312-

Purpose of Disbursement:  
 payroll

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4356715.56

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 3 0 / 2 0 0 7

Transaction ID: H471108.E98403

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

750.87

1930.80

2681.67

**B. Full Name (Last, First, Middle Initial)**  
 ADP, Inc.

Mailing Address

P O Box 9001006

City State Zip Code

Louisville KY 40290-

Purpose of Disbursement:  
 payroll deductions & taxes

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4359872.84

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 3 0 / 2 0 0 7

Transaction ID: H471108.E98404

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

41.96

107.88

149.84

**C. Full Name (Last, First, Middle Initial)**  
 Event Strategies, Inc.

Mailing Address

101 N Union Street, Suite 310

City State Zip Code

Alexandria VA 22314-

Purpose of Disbursement:  
 audio/visual

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3847651.13

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 0 1 / 2 0 0 7

Transaction ID: H471108.E98940

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

47600.00

122400.00

170000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

48392.83

124438.68

172831.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 189 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Event Strategies, Inc.

Mailing Address

101 N Union Street, Suite 310

City	State	Zip Code
------	-------	----------

Alexandria	VA	22314-
------------	----	--------

Purpose of Disbursement:  
 audio/visual

Category/  
 Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4314177.62

Date 

M	M
1	0

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98941

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

47600.00

122400.00

170000.00

**B. Full Name (Last, First, Middle Initial)**  
 Hello Florida, Inc.

Mailing Address

4207 Vinland Rd., M15

City	State	Zip Code
------	-------	----------

Orlando	FL	32811-
---------	----	--------

Purpose of Disbursement:  
 travel services

Category/  
 Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4144177.62

Date 

M	M
1	0

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98944

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4735.43

12176.82

16912.25

**C. Full Name (Last, First, Middle Initial)**  
 Mark Merrill

Mailing Address

5211 W Laurel Street, Suite 102

City	State	Zip Code
------	-------	----------

Tampa	FL	33607-
-------	----	--------

Purpose of Disbursement:  
 speaker services

Category/  
 Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4323536.21

Date 

M	M
1	0

 / 

D	D
1	7

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98945

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

700.00

1800.00

2500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

53035.43

136376.82

189412.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 190 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 HealthEquity, Inc.

Mailing Address

15 West Scenic Point Drive, S 400

City State Zip Code

Draper UT 84020-

Purpose of Disbursement:  
health insuranceCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4330156.13

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	7

Transaction ID: H471108.E98946

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

354.15

910.67

1264.82

**B. Full Name (Last, First, Middle Initial)**  
 Campaign Graphics Corporation

Mailing Address

Post Office Box 4859

City State Zip Code

Ocala FL 34478-

Purpose of Disbursement:  
gift bagsCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4328891.31

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	7

Transaction ID: H471108.E98947

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1499.43

3855.67

5355.10

**C. Full Name (Last, First, Middle Initial)**  
 Big Bend Eubanks Pest Control

Mailing Address

PO Box 12401

City State Zip Code

Tallahassee FL 32317-2401

Purpose of Disbursement:  
pest controlCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4334256.68

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: H471108.E98980

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

16.56

42.57

59.13

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1870.14

4808.91

6679.05

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 191 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Elsassers Lock & Key

Mailing Address

1909 N. Monroe St.

City	State	Zip Code
Tallahassee	FL	32303-

 Purpose of Disbursement:  
lock repair

Category/ Type
-------------------

 Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4334345.68

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: H471108.E98981

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

24.92

64.08

89.00

**B. Full Name (Last, First, Middle Initial)**  
LexisNexis

Mailing Address

P.O. BOX 7247-7090

City	State	Zip Code
Philadelphia	PA	19170-7090

 Purpose of Disbursement:  
internet research

Category/ Type
-------------------

 Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4334111.55

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: H471108.E98983

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

979.44

2518.56

3498.00

**C. Full Name (Last, First, Middle Initial)**  
Shred-It Tallahassee

Mailing Address

P O Box 470

City	State	Zip Code
Midway	FL	32343-

 Purpose of Disbursement:  
shredding service

Category/ Type
-------------------

 Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4345553.62

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: H471108.E98984

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14.00

36.00

50.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1018.36

2618.64

3637.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 192 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Sonitrol of Tallahassee, Inc.

Mailing Address

P O Box 1678

City	State	Zip Code
Tallahassee	FL	32302-1678

Purpose of Disbursement:  
key cardCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4334197.55

Date 10 / 30 / 2007

Transaction ID: H471108.E98985

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.08		61.92		86.00

**B. Full Name (Last, First, Middle Initial)**  
T-Mobile

Mailing Address

PO Box 660252

City	State	Zip Code
Dallas	TX	75266-0252

Purpose of Disbursement:  
telephoneCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4368368.70

Date 10 / 30 / 2007

Transaction ID: H471108.E98987

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
167.00		429.42		596.42

**C. Full Name (Last, First, Middle Initial)**  
ADP, Inc.

Mailing Address

P O Box 9001006

City	State	Zip Code
Louisville	KY	40290-

Purpose of Disbursement:  
payroll servicesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4359723.00

Date 10 / 30 / 2007

Transaction ID: H471108.E98988

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.14		72.36		100.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
219.22		563.70		782.92

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 193 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Fort Knox Storage, NE

Mailing Address

2807 Capital Circle NE

City	State	Zip Code
------	-------	----------

Tallahassee	FL	32308-
-------------	----	--------

Purpose of Disbursement:  
rent

Category/ Type
-------------------

Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4344316.12

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98991

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

161.04

414.09

575.13

**B. Full Name (Last, First, Middle Initial)**  
Community Coffee Company, LLC

Mailing Address

P O Box 60141

City	State	Zip Code
------	-------	----------

New Orleans	LA	70160-
-------------	----	--------

Purpose of Disbursement:  
coffee supplies

Category/ Type
-------------------

Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4356932.26

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98992

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

60.68

156.02

216.70

**C. Full Name (Last, First, Middle Initial)**  
Staples Business Advantage

Mailing Address

Dept ATL P O Box 530621

City	State	Zip Code
------	-------	----------

Atlanta	GA	30353-
---------	----	--------

Purpose of Disbursement:  
office supplies

Category/ Type
-------------------

Activity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4359622.50

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98993

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

753.27

1936.97

2690.24

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

974.99

2507.08

3482.07

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 194 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Verizon Wireless

Mailing Address

PO Box 660108

City	State	Zip Code
Dallas	TX	75266-0108

Purpose of Disbursement:  
 telephone

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4351190.60

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98994

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

729.95

1877.03

2606.98

**B. Full Name (Last, First, Middle Initial)**  
 Verizon Wireless

Mailing Address

PO Box 660108

City	State	Zip Code
Dallas	TX	75266-0108

Purpose of Disbursement:  
 telephone

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4351385.12

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98995

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

54.47

140.05

194.52

**C. Full Name (Last, First, Middle Initial)**  
 Xerox Corporation

Mailing Address

PO Box 660303

City	State	Zip Code
Dallas	TX	75266-

Purpose of Disbursement:  
 equipment lease

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4343740.99

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98996

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2615.43

6725.38

9340.81

## **SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3399.85

8742.46

12142.31

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 195 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
NuVox Communications

Mailing Address

P O Box 580451

City	State	Zip Code
Charlotte	NC	28258-0451

Purpose of Disbursement:  
telephoneCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4362987.34

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98997

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

872.06

2242.44

3114.50

**B. Full Name (Last, First, Middle Initial)**  
Office Depot Credit Plan

Mailing Address

P O Box 689020

City	State	Zip Code
Des Moines	IA	50368-9020

Purpose of Disbursement:  
office suppliesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4330613.55

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98998

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

128.08

329.34

457.42

**C. Full Name (Last, First, Middle Initial)**  
Embarq

Mailing Address

PO Box 96064

City	State	Zip Code
Charlotte	NC	28296-

Purpose of Disbursement:  
telephoneCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4368495.42

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98999

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

35.48

91.24

126.72

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1035.62

2663.02

3698.64

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 196 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**

Lockes Heating &amp; A/C

Mailing Address

700 Blountstown Highway

City State Zip Code

Tallahassee FL 32304-

Purpose of Disbursement:  
electrical workCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4348583.62

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: H471108.E99001

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

848.40

2181.60

3030.00

**B. Full Name (Last, First, Middle Initial)**

Avaya Financial Services

Mailing Address

1 CIT Drive

City State Zip Code

Livingston NJ 07039-

Purpose of Disbursement:  
telephone equipment rentalCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4370355.77

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: H471108.E99002

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

317.37

816.08

1133.45

**C. Full Name (Last, First, Middle Initial)**

Muzak LLC

Mailing Address

P O Box 71070

City State Zip Code

Charlotte NC 28272-1070

Purpose of Disbursement:  
cable serviceCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4370440.11

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: H471108.E99003

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

23.62

60.72

84.34

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1189.39

3058.40

4247.79

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 197 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 HealthEquity, Inc.

Mailing Address

15 West Scenic Point Drive, S 400

City State Zip Code

Draper UT 84020-

Purpose of Disbursement:  
administration feeCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4370459.86

Date MM / DD / YYYY  
10 / 30 / 2007

Transaction ID: H471108.E99004

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.53		14.22		19.75

**B. Full Name (Last, First, Middle Initial)**  
 TownePlace Suites

Mailing Address

1876 Capital Circle NE

City State Zip Code

Tallahassee FL 32308-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4369032.85

Date MM / DD / YYYY  
10 / 30 / 2007

Transaction ID: H471108.E99005

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
150.48		386.95		537.43

**C. Full Name (Last, First, Middle Initial)**  
 AT&T

Mailing Address

P O Box 105262

City State Zip Code

Atlanta GA 30348-5262

Purpose of Disbursement:  
telephoneCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4371390.94

Date MM / DD / YYYY  
10 / 30 / 2007

Transaction ID: H471108.E99006

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
155.42		399.64		555.06

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
311.43		800.81		1112.24

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 198 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 American Exterior Cleaning

Mailing Address  
 P O Box 3768

City State Zip Code  
 Tallahassee FL 32315-3768

Purpose of Disbursement:  
 cleaning service

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4371885.21

Date M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 7

Transaction ID: H471108.E99007

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

35.00

90.00

125.00

**B. Full Name (Last, First, Middle Initial)**  
 Delmar W. Johnson III

Mailing Address  
 128 Tildenville School Road

City State Zip Code  
 Winter Garden FL 34787-

Purpose of Disbursement:  
 travel

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4354033.89

Date M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 7

Transaction ID: H471108.E99008

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

113.34

291.43

404.77

**C. Full Name (Last, First, Middle Initial)**  
 AFLAC Inc.

Mailing Address  
 1932 Wynnton Road

City State Zip Code  
 Columbus GA 31999-

Purpose of Disbursement:  
 supplemental insurance

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4334400.18

Date M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 0 7

Transaction ID: H471108.E99010

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

15.26

39.24

54.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

163.60

420.67

584.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 199 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Uptilt, Inc.

Mailing Address

4400 Bohannon Drive, Suite 200

City State Zip Code

Menlo Park CA 94025-

Purpose of Disbursement:  
email serviceCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4366772.28

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E99012

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

340.48

875.52

1216.00

**B. Full Name (Last, First, Middle Initial)**  
Gregory J Ungru

Mailing Address

3869 Overlook Drive

City State Zip Code

Tallahassee FL 32311-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4365556.28

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E99013

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

112.64

289.63

402.27

**C. Full Name (Last, First, Middle Initial)**  
Antoinette Walwyn

Mailing Address

14352 Colonial Grand, #2506

City State Zip Code

Orlando FL 32837-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 1

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4369222.32

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E99014

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

53.05

136.42

189.47

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

506.17

1301.57

1807.74

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 200 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Mary Church

Mailing Address

3810 Covington Lane

City	State	Zip Code
Lakeland	FL	33810-

Purpose of Disbursement:  
travelCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4371760.21

Activity or Event Identifier:  
ADMINISTRATION B 1Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E99015

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

34.83

89.55

124.38

**B. Full Name (Last, First, Middle Initial)**  
Susan Wright

Mailing Address

9763 S Horseshoe Road

City	State	Zip Code
Tallahassee	FL	32317-

Purpose of Disbursement:  
travelCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4371635.83

Activity or Event Identifier:  
ADMINISTRATION B 1Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E99017

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

68.57

176.32

244.89

**C. Full Name (Last, First, Middle Initial)**  
AT&T Mobility

Mailing Address

P O Box 538695

City	State	Zip Code
Atlanta	GA	30353-8695

Purpose of Disbursement:  
telephoneCategory/  
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4372330.28

Activity or Event Identifier:  
ADMINISTRATION B 1Date 

M	M
1	0

 / 

D	D
3	1

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E99019

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

124.62

320.45

445.07

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

228.02

586.32

814.34

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 201 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**

ICI Aviation Leasing, LLC

## Mailing Address

2379 Beville Road

City State Zip Code

Daytona Beach

FL

32119-

## Purpose of Disbursement:

air travel 10/25-inkind

Category/  
Type

## Activity or Event Identifier:

ADMINISTRATION INKIND

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4444420.28

Date 

M	M
1	0

 / 

D	D
2	5

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.C1412900

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

3900.00

3900.00

**B. Full Name (Last, First, Middle Initial)**

Rosen Hotels &amp; Resorts

## Mailing Address

7600 International Drive

City State Zip Code

Orlando

FL

32819-

## Purpose of Disbursement:

venue, food &amp; bev. 10/19-inkind

Category/  
Type

## Activity or Event Identifier:

ADMINISTRATION INKIND

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4394330.28

Date 

M	M
1	0

 / 

D	D
1	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.C1412901

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

22000.00

22000.00

**C. Full Name (Last, First, Middle Initial)**

Crystal Beach Development

## Mailing Address

PO Box 1735

City State Zip Code

Destin

FL

32540-

## Purpose of Disbursement:

airplane use 10/19-inkind

Category/  
Type

## Activity or Event Identifier:

ADMINISTRATION INKIND

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4396020.28

Date 

M	M
1	0

 / 

D	D
1	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.C1412902

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

1690.00

1690.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

27590.00

27590.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 202 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Communications Intl, Inc.

Mailing Address

4450 US Highway 1

City State Zip Code

Vero Beach FL 32967-

Purpose of Disbursement:  
 wireless radios 10/20-inkind

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION INKIND

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4440520.28

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	0	7

Transaction ID: H471108.C1412903

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

44500.00

44500.00

**B. Full Name (Last, First, Middle Initial)**  
 Non-Federal Checking

Mailing Address

PO Box 311

City State Zip Code

Tallahassee FL 32302-

Purpose of Disbursement:  
 Note:inkinds escrow

Category/  
Type

Activity or Event Identifier:  
 ADMIN INKIND TRANSFER

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4459420.28

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	9	/	2	0	0	7

Transaction ID: H471029.E98343

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

15000.00

0.00

15000.00

**C. Full Name (Last, First, Middle Initial)**  
 Non-Federal Checking

Mailing Address

PO Box 311

City State Zip Code

Tallahassee FL 32302-

Purpose of Disbursement:  
 Note:inkinds escrow

Category/  
Type

Activity or Event Identifier:  
 ADMIN INKIND TRANSFER

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4466455.28

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	7

Transaction ID: H471029.E98346

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5000.00

0.00

5000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

20000.00

44500.00

64500.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 203 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Non-Federal Checking

Mailing Address

PO Box 311

City State Zip Code

Tallahassee FL 32302-

Purpose of Disbursement:  
Note: inkinds escrowCategory/  
TypeActivity or Event Identifier:  
ADMIN INKIND TRANSFER

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4461455.28

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: H471108.E99032

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2035.00

0.00

2035.00

**B. Full Name (Last, First, Middle Initial)**  
Forward Strategies, Inc.

Mailing Address

8959 Oldham Way

City State Zip Code

West Palm Beach FL 33412-

Purpose of Disbursement:  
fundraising consultingCategory/  
TypeActivity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: H471017.E98258

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2433.99

27990.91

30424.90

**C. Full Name (Last, First, Middle Initial)**  
Amanda Wheeler

Mailing Address

2740 W. Tharpe Street. #405

City State Zip Code

Tallahassee FL 32303-

Purpose of Disbursement:  
Reimb:see below-travelCategory/  
TypeActivity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date  M  M /  D  D /  Y  Y  Y  Y

Transaction ID: H471017.E98263

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.08

12.37

13.45

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4470.07

28003.28

32473.35

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 204 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Gate

Mailing Address

1708 W. Tennessee

City State Zip Code

Tallahassee FL 32301-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date  M  M /  D  D /  Y  Y  Y  Y

1 0 / 0 2 / 2 0 0 7

Transaction ID: H471108.E98477

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1.08

12.37

13.45

**B. Full Name (Last, First, Middle Initial)**  
American Express

Mailing Address

P.O. Box 650448

City State Zip Code  
Dallas TX 75265-0448Purpose of Disbursement:  
Credit Card:see below-travel&mealsCategory/  
TypeActivity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date  M  M /  D  D /  Y  Y  Y  Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471017.E98273

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

116.94

1344.76

1461.70

**C. Full Name (Last, First, Middle Initial)**  
US Airways

Mailing Address

3800 E. Sky Harbor Blvd.

City State Zip Code  
Phoenix AZ 85034-Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date  M  M /  D  D /  Y  Y  Y  Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98475

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

87.62

1007.68

1095.30

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

116.94

1344.76

1461.70

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)**  
**DISBURSEMENT FOR ALLOCATED**  
**FEDERAL/NONFEDERAL ACTIVITY**

PAGE 205 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**

US Airways

Mailing Address

3800 E. Sky Harbor Blvd.

City State Zip Code

Phoenix AZ 85034-

Purpose of Disbursement:  
travelCategory/  
Type

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Activity or Event Identifier:

MD-08

**[MEMO ITEM]**travel

Date M M / D D / Y Y Y Y

Transaction ID: H471108.E98476

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.80

9.20

10.00

**B. Full Name (Last, First, Middle Initial)**

Omega Deli

Mailing Address

315 E. Robinson Street

City State Zip Code

Orlando FL 32803-

Purpose of Disbursement:  
mealsCategory/  
Type

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Activity or Event Identifier:

MD-08

**[MEMO ITEM]**meals

Date M M / D D / Y Y Y Y

Transaction ID: H471108.E98472

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

13.39

154.01

167.40

**C. Full Name (Last, First, Middle Initial)**

Sundance Lodging

Mailing Address

RR 3 Box A1

City State Zip Code

Provo UT 84604-

Purpose of Disbursement:  
mealsCategory/  
Type

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Activity or Event Identifier:

MD-08

**[MEMO ITEM]**meals

Date M M / D D / Y Y Y Y

Transaction ID: H471108.E98474

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

8.40

96.60

105.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 206 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Novo Restaurant

Mailing Address

726 Higuera Street

City	State	Zip Code
------	-------	----------

San Luis Obispo	CA	93406-
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Purpose of Disbursement:  
 meals

Category/  
 Type

Activity or Event Identifier:  
 MD-08

**[MEMO ITEM]**meals

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98473

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
---------------	---	------------------	---	--------------

6.72

77.28

84.00

**B. Full Name (Last, First, Middle Initial)**  
 American Express

Mailing Address

P.O. Box 650448

City	State	Zip Code
Dallas	TX	75265-0448

Purpose of Disbursement:  
 Credit Card:see below-travel & meal

Category/  
 Type

Activity or Event Identifier:  
 MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98275

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
---------------	---	------------------	---	--------------

1519.09

17469.48

18988.57

**C. Full Name (Last, First, Middle Initial)**  
 Delta Airlines

Mailing Address

Dept 680, 1030 Delta Boulevard

City	State	Zip Code
Atlanta	GA	30320-2526

Purpose of Disbursement:  
 travel

Category/  
 Type

Activity or Event Identifier:  
 MD-08

**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98419

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
---------------	---	------------------	---	--------------

19.15

220.25

239.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
---------------	---	------------------	---	--------------

1519.09

17469.48

18988.57

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
---------------	------------------	--------------

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 207 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 American Airlines

Mailing Address  
 PO Box 619616

City State Zip Code  
 Dallas TX 75261-

Purpose of Disbursement:  
 travel

Category/Type

Activity or Event Identifier:  
 MD-08

**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 10 / 09 / 2007

Transaction ID: H471108.E98430

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

97.98

1126.82

1224.80

**B. Full Name (Last, First, Middle Initial)**  
 American Airlines

Mailing Address  
 PO Box 619616

City State Zip Code  
 Dallas TX 75261-

Purpose of Disbursement:  
 travel

Category/Type

Activity or Event Identifier:  
 MD-08

**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 10 / 09 / 2007

Transaction ID: H471108.E98431

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

97.98

1126.82

1224.80

**C. Full Name (Last, First, Middle Initial)**  
 Marriott Hotels

Mailing Address  
 10 N. Ocean Blvd.

City State Zip Code  
 Delray Beach FL 33483-

Purpose of Disbursement:  
 travel

Category/Type

Activity or Event Identifier:  
 MD-08

**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 10 / 09 / 2007

Transaction ID: H471108.E98435

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.49

5.59

6.08

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 208 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Marriott Hotels

Mailing Address

10 N. Ocean Blvd.

City State Zip Code

Delray Beach FL 33483-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98436

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

27.17

312.48

339.65

**B. Full Name (Last, First, Middle Initial)**  
Marriott Hotels

Mailing Address

10 N. Ocean Blvd.

City State Zip Code

Delray Beach FL 33483-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98438

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

19.54

224.65

244.19

**C. Full Name (Last, First, Middle Initial)**  
Alpha Travel And Tours

Mailing Address

926 N. Monroe Street

City State Zip Code

Tallahassee FL 32303-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98439

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2.00

23.00

25.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 209 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**

Alpha Travel And Tours

## Mailing Address

926 N. Monroe Street

City State Zip Code

Tallahassee FL 32303-

Purpose of Disbursement:  
travelCategory/  
Type

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

## Activity or Event Identifier:

MD-08

**[MEMO ITEM]**travelDate M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98425

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.00

23.00

25.00

**B. Full Name (Last, First, Middle Initial)**

Alpha Travel And Tours

## Mailing Address

926 N. Monroe Street

City State Zip Code

Tallahassee FL 32303-

Purpose of Disbursement:  
travelCategory/  
Type

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

## Activity or Event Identifier:

MD-08

**[MEMO ITEM]**travelDate M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98420

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2.00

23.00

25.00

**C. Full Name (Last, First, Middle Initial)**

New York Prime

## Mailing Address

2350 Executive Center

City State Zip Code

Boca Raton FL 33431-

Purpose of Disbursement:  
mealsCategory/  
Type

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

## Activity or Event Identifier:

MD-08

**[MEMO ITEM]**mealsDate M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98416

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

60.75

698.66

759.41

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 210 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Little Nello & Inn

Mailing Address

136 Main Street

City State Zip Code

Southampton

NY

11968-

Purpose of Disbursement:  
receptionCategory/  
Type

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Activity or Event Identifier:  
MD-08Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

**[MEMO ITEM]**reception

Transaction ID: H471108.E98417

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

494.96

5692.07

6187.03

**B. Full Name (Last, First, Middle Initial)**  
 Wolfgangs Steakhouse

Mailing Address

4 Park Avenue

City State Zip Code

New York

NY

10016-

Purpose of Disbursement:  
mealsCategory/  
Type

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Activity or Event Identifier:  
MD-08Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

**[MEMO ITEM]**meals

Transaction ID: H471108.E98418

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

54.23

623.68

677.91

**C. Full Name (Last, First, Middle Initial)**  
 Diamond Limousine

Mailing Address

219 West 4860 South

City State Zip Code

Salt Lake City

UT

84107-

Purpose of Disbursement:  
travelCategory/  
Type

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Activity or Event Identifier:  
MD-08Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

**[MEMO ITEM]**travel

Transaction ID: H471108.E98421

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

109.99

1264.88

1374.87

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 211 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Diamond Limousine

Mailing Address

219 West 4860 South

City State Zip Code

Salt Lake City UT 84107-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98437

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

38.88

447.12

486.00

**B. Full Name (Last, First, Middle Initial)**  
Sundance Lodging

Mailing Address

RR 3 Box A1

City State Zip Code

Provo UT 84604-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98422

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

109.21

1255.87

1365.08

**C. Full Name (Last, First, Middle Initial)**  
Sundance Lodging

Mailing Address

RR 3 Box A1

City State Zip Code

Provo UT 84604-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98423

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

21.86

251.42

273.28

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 212 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**

Macaroni Grill

## Mailing Address

4801 N University Avenue, Ste. 50

City State Zip Code

Provo UT 84604-

Purpose of Disbursement:  
mealsCategory/  
Type

## Activity or Event Identifier:

MD-08

**[MEMO ITEM]**meals

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date  M  M /  D  D /  Y  Y  Y  Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98424

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7.43

85.45

92.88

**B. Full Name (Last, First, Middle Initial)**

Vincci Garden Court Hotel

## Mailing Address

520 Cowper Street

City State Zip Code

Palo Alto CA 94301-

Purpose of Disbursement:  
travelCategory/  
Type

## Activity or Event Identifier:

MD-08

**[MEMO ITEM]**travel

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date  M  M /  D  D /  Y  Y  Y  Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98426

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17.51

201.39

218.90

**C. Full Name (Last, First, Middle Initial)**

Vincci Garden Court Hotel

## Mailing Address

520 Cowper Street

City State Zip Code

Palo Alto CA 94301-

Purpose of Disbursement:  
travelCategory/  
Type

## Activity or Event Identifier:

MD-08

**[MEMO ITEM]**travel

## Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date  M  M /  D  D /  Y  Y  Y  Y

1 0 / 0 9 / 2 0 0 7

Transaction ID: H471108.E98427

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

19.42

223.38

242.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 213 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Vincci Garden Court Hotel

Mailing Address

520 Cowper Street

City	State	Zip Code
Palo Alto	CA	94301-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98428

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

17.75

204.10

221.85

**B. Full Name (Last, First, Middle Initial)**  
Vincci Garden Court Hotel

Mailing Address

520 Cowper Street

City	State	Zip Code
Palo Alto	CA	94301-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98429

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

18.22

209.53

227.75

**C. Full Name (Last, First, Middle Initial)**  
Sultans Limousine

Mailing Address

3700 Ardilla Road

City	State	Zip Code
Atascadero	CA	93422-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98432

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

47.24

543.26

590.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 214 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Sultans Limousine

Mailing Address

3700 Ardilla Road

City	State	Zip Code
Atascadero	CA	93422-

Purpose of Disbursement:  
travel

Category/  
Type

Activity or Event Identifier:  
MD-08

**[MEMO ITEM]** travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98433

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

99.00

1138.50

1237.50

**B. Full Name (Last, First, Middle Initial)**  
Inn At Morro Bay

Mailing Address

60 State Park Road

City	State	Zip Code
Morro Bay	CA	93442-

Purpose of Disbursement:  
travel

Category/  
Type

Activity or Event Identifier:  
MD-08

**[MEMO ITEM]** travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98434

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

134.31

1544.58

1678.89

**C. Full Name (Last, First, Middle Initial)**  
Cheryl Seinfeld

Mailing Address

4059 Colleton Court

City	State	Zip Code
Tallahassee	FL	32311-

Purpose of Disbursement:  
travel

Category/  
Type

Activity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98279

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.54

40.72

44.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.54

40.72

44.26

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 215 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Forward Strategies, Inc.

Mailing Address

8959 Oldham Way

City State Zip Code

West Palm Beach FL 33412-

Purpose of Disbursement:  
travel & suppliesCategory/  
TypeActivity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	7

Transaction ID: H471017.E98280

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

67.50

776.30

843.80

**B. Full Name (Last, First, Middle Initial)**  
Baer Air

Mailing Address

900 Airport Boulevard, Ste. 2

City State Zip Code

Merritt Island FL 32952-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	7

Transaction ID: H471017.E98286

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

270.16

3106.87

3377.03

**C. Full Name (Last, First, Middle Initial)**  
Amanda Wheeler

Mailing Address

2740 W. Tharpe Street. #405

City State Zip Code

Tallahassee FL 32303-

Purpose of Disbursement:  
Reimb:see below-office suppliesCategory/  
TypeActivity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	7

Transaction ID: H471017.E98292

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

5.46

62.74

68.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

343.12

3945.91

4289.03

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 216 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Staples

Mailing Address

2345 Apalachee Parkway

City	State	Zip Code
Tallahassee	FL	32301-

Purpose of Disbursement:  
office supplies

Category/  
Type

Activity or Event Identifier:  
MD-08

**[MEMO ITEM]** office supplies

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E98406

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.46

62.74

68.20

**B. Full Name (Last, First, Middle Initial)**  
Baer Air

Mailing Address

900 Airport Boulevard, Ste. 2

City	State	Zip Code
Merritt Island	FL	32952-

Purpose of Disbursement:  
travel

Category/  
Type

Activity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98294

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

72.84

837.66

910.50

**C. Full Name (Last, First, Middle Initial)**  
Baer Air

Mailing Address

900 Airport Boulevard, Ste. 2

City	State	Zip Code
Merritt Island	FL	32952-

Purpose of Disbursement:  
travel

Category/  
Type

Activity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98295

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

275.98

3173.72

3449.70

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

348.82

4011.38

4360.20

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE	217 / 224
FOR LINE 21a OF FORM 3X	

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Baer Air

Mailing Address

900 Airport Boulevard, Ste. 2

City	State	Zip Code
------	-------	----------

Merritt Island	FL	32952-
----------------	----	--------

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98296

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

201.53

2317.60

2519.13

**B. Full Name (Last, First, Middle Initial)**  
Baer Air

Mailing Address

900 Airport Boulevard, Ste. 2

City	State	Zip Code
------	-------	----------

Merritt Island	FL	32952-
----------------	----	--------

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
1	1

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98313

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

79.68

916.26

995.94

**C. Full Name (Last, First, Middle Initial)**  
Forward Strategies, Inc.

Mailing Address

8959 Oldham Way

City	State	Zip Code
------	-------	----------

West Palm Beach	FL	33412-
-----------------	----	--------

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471017.E98317

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

65.74

756.06

821.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

346.95

3989.92

4336.87

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 218 / 224

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Bobby Jindal Campaign Committee, LLC

Mailing Address

8550 United Plaza Blvd., Ste. 101

City State Zip Code

Baton Rouge LA 70809-

Purpose of Disbursement:  
refund-travelCategory/  
TypeActivity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	7

Transaction ID: H471108.E98405

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

-55.11

-633.72

-688.83

**B. Full Name (Last, First, Middle Initial)**  
American Express

Mailing Address

P.O. Box 650448

City State Zip Code

Dallas TX 75265-0448

Purpose of Disbursement:  
Credit Card:see below-travel & duesCategory/  
TypeActivity or Event Identifier:  
MD-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: H471108.E99009

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

105.80

1216.65

1322.45

**C. Full Name (Last, First, Middle Initial)**  
American Express

Mailing Address

P.O. Box 650448

City State Zip Code

Dallas TX 75265-0448

Purpose of Disbursement:  
member duesCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]**member dues

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: H471113.E99182

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.20

13.80

15.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

50.69

582.93

633.62

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 219 / 224  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Continental Airlines

Mailing Address  
 P O Box 4607

City	State	Zip Code
Houston	TX	77210-4607

Purpose of Disbursement:  
 travel

Category/Type

Activity or Event Identifier:  
 MD-08

**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471113.E99184

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.39		269.01		292.40

**B. Full Name (Last, First, Middle Initial)**  
 Continental Airlines

Mailing Address  
 P O Box 4607

City	State	Zip Code
Houston	TX	77210-4607

Purpose of Disbursement:  
 travel

Category/Type

Activity or Event Identifier:  
 MD-08

**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471113.E99185

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.39		269.01		292.40

**C. Full Name (Last, First, Middle Initial)**  
 Continental Airlines

Mailing Address  
 P O Box 4607

City	State	Zip Code
Houston	TX	77210-4607

Purpose of Disbursement:  
 travel

Category/Type

Activity or Event Identifier:  
 MD-08

**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471113.E99188

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.58		616.22		669.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 220 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Expedia

Mailing Address

3150 139th Avenue SE

City State Zip Code  
Bellevue WA 98005-

Purpose of Disbursement:  
travel

Category/  
Type

Activity or Event Identifier:  
MD-08

**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date  M  M /  D  D /  Y  Y  Y  Y  
1 0 / 3 0 / 2 0 0 7

Transaction ID: H471113.E99183

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.80

9.20

10.00

**B. Full Name (Last, First, Middle Initial)**  
Expedia

Mailing Address

3150 139th Avenue SE

City State Zip Code  
Bellevue WA 98005-

Purpose of Disbursement:  
travel

Category/  
Type

Activity or Event Identifier:  
MD-08

**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date  M  M /  D  D /  Y  Y  Y  Y  
1 0 / 3 0 / 2 0 0 7

Transaction ID: H471113.E99189

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.40

4.60

5.00

**C. Full Name (Last, First, Middle Initial)**  
Expedia

Mailing Address

3150 139th Avenue SE

City State Zip Code  
Bellevue WA 98005-

Purpose of Disbursement:  
travel

Category/  
Type

Activity or Event Identifier:  
MD-08

**[MEMO ITEM]**travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date  M  M /  D  D /  Y  Y  Y  Y  
1 0 / 3 0 / 2 0 0 7

Transaction ID: H471113.E99187

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.40

4.60

5.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 221 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Quick Stop

Mailing Address

4784 Capital Circle

City	State	Zip Code
Tallahassee	FL	32305-

Purpose of Disbursement:  
travelCategory/  
TypeActivity or Event Identifier:  
MD-08**[MEMO ITEM]** travel

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

790294.67

Date 

M	M
1	0

 / 

D	D
3	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471113.E99186

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.63

30.22

32.85

**B. Full Name (Last, First, Middle Initial)**  
Trigeant Air, LLC

Mailing Address

3020 Military Trail, Ste. 100

City	State	Zip Code
Boca Raton	FL	33431-

Purpose of Disbursement:  
airplane use-10/12 inkindsCategory/  
TypeActivity or Event Identifier:  
MD-08 INKIND

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

247715.67

Date 

M	M
1	0

 / 

D	D
1	2

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471015.C1409572

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

794.00

794.00

**C. Full Name (Last, First, Middle Initial)**  
Non-Federal Checking

Mailing Address

PO Box 311

City	State	Zip Code
Tallahassee	FL	32302-

Purpose of Disbursement:  
Note:MD-08 inkinds escrowCategory/  
TypeActivity or Event Identifier:  
MD-08 INKIND TRANSFER

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

19818.53

Date 

M	M
1	0

 / 

D	D
2	0

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H471108.E99031

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

-2035.00

0.00

-2035.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

-2035.00

794.00

-1241.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 222 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A. Full Name (Last, First, Middle Initial)**  
Pinnacle Direct, Inc.

Mailing Address

15260 113th Street North

City State Zip Code

Stillwater MN 55082-

Purpose of Disbursement:  
postageCategory/  
TypeActivity or Event Identifier:  
DM-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

389495.10

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	4	/	2	0	0	7

Transaction ID: H471017.E98265

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

7156.87

146.06

7302.93

**B. Full Name (Last, First, Middle Initial)**  
Steve Brown Direct Mail, Inc.

Mailing Address

731 Divot Drive

City State Zip Code

Fernley NV 89408-

Purpose of Disbursement:  
fundraising consultingCategory/  
TypeActivity or Event Identifier:  
DM-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

389495.10

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: H471108.E98986

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1960.00

40.00

2000.00

**C. Full Name (Last, First, Middle Initial)**  
FLS Connect, LLC

Mailing Address

7300 Hudson Blvd., Suite 270

City State Zip Code

Saint Paul MN 55128-

Purpose of Disbursement:  
telemarketingCategory/  
TypeActivity or Event Identifier:  
TM-08

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

145343.21

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	7

Transaction ID: H471108.E98982

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10039.10

101.40

10140.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

19155.97

287.46

19443.43

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 223 / 224  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Florida

**A.** Full Name (Last, First, Middle Initial)  
SCM Associates, Inc.

Mailing Address

P O Box 254

City

State

Zip Code

Dublin

NH

03444-0254

Purpose of Disbursement:  
telemarketing

Category/  
Type

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

145343.21

Activity or Event Identifier:  
TM-08

Date

M M

/

D D

/

Y Y

Y Y

Transaction ID: H471108.E99000

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6932.44

70.02

7002.46

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6932.44

70.02

7002.46

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

245762.86

632798.78

878561.64

Form/Schedule: F3XA

Transaction ID:

2nd AMENDMENT DESCRIPTION: This report is being amended to disclose a debt that was inadvertently left off when the 1st Amended Report was prepared due to a software glitch. It is also being amended to reflect the fundraising allocation ratios on Schedule H2. 1st AMENDMENT DESCRIPTION: This report is being amended to correct the Calendar Year-To-Date figures in Column B for lines 6c, 6d, 7, 11(a)(i), 11(a)(ii), 11(a)(iii), 11(d), 19, 20, 21(a)(i), 21(a)(ii), 21(b), 21(c), 30(b), 30(c), 31, 32, 33, 35, 36 and 38 due to amendments filed for the October Monthly Report (7/1/07-9/30/07) after the November Monthly Report (10/1/07-10/31/07) was filed. Summary of Escrow Transfers and Balance for In-Kinds as Reported on Sch H4 and H3 Administrative Escrow account and In-kinds 10/1/07 balance is \$26,669.15 10/19/07 transfer to administrative escrow account of \$15,000. 10/19/07 Crystal Beach in-kind of \$1,690.00 total using \$473.20 of escrow balance. 10/20/07 transfer to administrative escrow account of \$2,035 from MD-08 escrow. 10/20/07 Communications International in-kind of \$44,500 total using \$12,460 of escrow balance. 10/22/07 Rosen Hotels & Resorts in-kind of \$22,000 total using \$6,160 of escrow balance. 10/25/07 ICI Aviation Leasing in-kind of \$3,900 total using \$1,092 of escrow balance. 10/29/07 transfer to administrative escrow account of \$5,000. 10/31/07 balance in Administrative escrow account of \$28,518.95. MD-08 Escrow account and In-kinds 10/1/07 balance is \$75,795.72. 10/12/07 Trigeant Air in-kind of \$794 total using \$63.52 of escrow balance. 10/20/07 transfer from MD-08 escrow account of \$2,035 to administrative escrow. 10/31/07 balance in MD-08 escrow account of \$73,697.20. City, state and zip errors for Active Core Technologies and Scootaround are due to foreign addresses that have been input on the 2nd street address line. No expenditure was made on behalf of a specifically identified federal candidate. No expenditure was for a public communication that referred to a clearly identified candidate for Federal office and that promoted, supported, attacked or opposed any such candidate for Federal office. All disbursements for salaries and benefits disclosed on Schedule H4 are for employees who did not spend more than 25% of their compensated time during the reporting period on Federal election activities or activities in connection with a Federal election. The Committee uses the Escrow option for receipt of corporate in-kind donations as provided for by the Commission in Advisory Opinion 1992-33. The method ensures that prohibited sources are not used to fund the federal share of allocable activity expenses. Escrow balance figures above have been updated to the correct balances according to the Form 99 file on 8/11/08.

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